

GO Health Strategic Plan 2020-2024

Genesee & Orleans Health Departments

ADOPTED
August 4, 2020



FROM THE PUBLIC HEALTH DIRECTOR

We are pleased to present the 2020-2024 Strategic Plan for GO Health, the Genesee and Orleans Health Departments shared services public health arrangement. This plan forms the foundation on which we are building a new approach to public health that moves us toward becoming the “chief health strategist” for our two counties. The field of public health is evolving toward a “population health” approach, adding in proactive initiatives that are aimed at encouraging and supporting personal health practices that prevent chronic disease and accidents as well as the traditional communicable disease planning and prevention. Historically, public health in our communities has focused on the provision of care services that filled in clinical gaps. We are intentionally shifting to a new role where we now will coordinate the fulfillment of missing or limited care options. Our priority is to focus on prevention efforts in collaboration with our community partners, together moving “upstream” and heading off the burden of disease at its roots. We are well-positioned to move in this direction.

GO Health’s work in Genesee and Orleans Counties has been exemplary. Our departments are held in high esteem, and are proud of being in position to begin the process of accreditation through the Public Health Accreditation Board (PHAB). This credential is more than about pride. It is a reassurance to the communities we serve and the public officials with whom we must work every day that we are carrying out our duties in an effective and professional manner.

The Strategic Plan that follows lays out a clarified mission for GO Health and a clear “Strategic Intent” so that all of our publics can better understand what we are trying to achieve together. The Plan will be enhanced by new communication tools and a “branding” initiative aimed at re-introducing GO Health to our publics and connecting with them through social media and other sources that are most likely to resonate and create a necessary response.

The planning was led by our planning consultant, Kenneth A Rogers, who took the GO Health leadership team and Board of Health through a thorough and inclusive process. Research and assumptions can be found in the Overview Analysis (Appendix A). Input into the Overview Analysis included:

- An exploratory meeting with the Public Health Director
- A series of seven confidential key informant interviews with management staff, Board of Health members, and the two county managers.
- Review of the previous planning documents, recent annual reports and other documents that could provide insight into the culture, strategies, and underlying philosophy of the work of GO Health.
- An in-depth focus group with 11 employees of the two health departments.
- A survey of all employees (Survey Monkey) that resulted in 38 responses.

The various drafts of the Overview Analysis were reviewed and updated in meetings of the Leadership Team (Appendix G). At those meetings the fundamentals of the Plan document took shape. We reviewed and tested the existing mission, vision/shared purpose, and values statements and together explored drafts updates to each. The Leadership Team established a clear strategic intent (what we are trying to achieve with this plan) for GO Health. Together we achieved consensus on several fundamental strategies.

With the results of the planning sessions the consultant prepared a draft long-range strategic plan document. That document went through several iterations, in meetings with the public health director and the Leadership Team, first around the goals and strategies, and then around objectives and metrics. The Plan was submitted to the Board of Health and approved on August 4, 2020. This Strategic Plan looks out five years. However, it will be updated every year so that the ideas stay fresh and the document remains relevant. Please feel free to contact me with any questions.



Paul A. Pettit
GO Health | Public Health Director

GO HEALTH STRATEGIC PLAN

VISION

Everyone in our region can achieve an optimal and equitable level of health and well-being.



MISSION

Genesee and Orleans Health Departments (GO Health) is a shared services arrangement that promotes the necessary safe and healthy environment, and health behaviors, that lead to improved health outcomes and community quality of life.



CORE VALUES

Commitment: We improve our work environment and services through a continuous dedication to each other and staying true to public health principals and our vision.

Integrity: We maintain a high standard of professionalism, transparency, honesty and fairness, building trust as we deliver services and represent the departments and counties we serve.

Respect: We demonstrate in our actions and words that all people are important and deserving of fair and equitable treatment.

Collaboration: We work together as a team, across agencies, and with the community toward our common goals.

Leadership: We embrace a culture of transcending influence throughout our organization and the community.

Excellence: We consistently perform to the best of our abilities in all aspects of the work we do.



STRATEGIC INTENT

Move from a narrow focus on meeting baseline regulatory-required aspects of public health to a broader population health agenda. With municipal, county, private sector, and regional partners, address the social determinants that influence overall health and well-being.



POSITIONING

Genesee and Orleans Health Departments -- a unified and accredited *GO Health* -- is the chief health strategist for our counties.



STRATEGIC PRIORITIES [not in priority order]

1. Capacity-building, programs and systems
2. Population health
3. Collaborations and alignment
4. Resource development
5. Unified culture
6. Brand and impact



GOALS FOR STRATEGIC PRIORITIES

1. Capacity-building, programs and systems
 - 1.1 GO Health will achieve and maintain accreditation through the Public Health Accreditation Board (PHAB).
 - 1.2 GO Health Departments will have administrative systems and processes that support effective and efficient operations.
2. Population health
 - 2.1 All people will be empowered to make educated decisions and have the opportunity to optimize their health.
 - 2.2 GO Health will have a broad reach across the counties – engaging, connecting, and positively influencing diverse communities across the two counties.
3. Collaborations and alignment
 - 3.1 GO Health will have, and enhance, collaborations with community partners and stakeholders that are aligned with shared goals and outcomes.
 - 3.2 GO Health will have collaborations in place across county and municipal programs to maximize the availability and impact of services.
4. Resource development
 - 4.1 GO Health will have sufficient and sustainable non-county funding sources to supplement support of under-funded State mandates and to support implementation of population health initiatives.
5. Unified culture
 - 5.1 GO Health will continuously maintain a well-trained workforce committed to a common mission, working cooperatively in a supportive work environment that encourages excellence.
6. Brand and impact
 - 6.1 Branding and awareness initiatives will clarify our role and help to align attitudes and behaviors.



DRIVING STRATEGIES

1. Continue to find new ways to leverage available resources, exploring new opportunities for efficiencies through internal and external shared service arrangements.
2. Become more transformative, finding opportunities to take the larger steps necessary to positively impact health status in our counties.
3. Continue to build on our existing capacity, improving capabilities throughout the departments. As necessary add capacity, mostly by leveraging shared services and acquiring additional funding that will help move us forward.
4. Expand our capacity to be a change agent by taking on a more active/visible role as a facilitator and convener for our counties. Continue to find new ways to engage community-based providers in the public health mission, with a special focus on social determinants of health (SDoH).
5. Encourage creative collaboration across agencies, sectors, and regions.
6. Introduce population health initiatives that are aimed at changing health behaviors using the 3-4-50 model, and that are in sync with county efforts around social determinants of health.
7. Continuously foster community efforts that support inclusion and diversity.



SCORECARD MEASURES

FOCUS AREA	PROCESS MEASURES: KPIs	OUTCOME MEASURES
Capacity-building, programs and systems	<ol style="list-style-type: none"> a. Alignment with PHAB accreditation requirements b. VMSG – integrated performance management tool adopted and in use 	<ol style="list-style-type: none"> a. Accreditation achieved and maintained b. Improved performance management across all grants.
Population health	<ol style="list-style-type: none"> a. Implementation of CHIP (Appendix F) as indicated in Annual Report b. Annual update of CHIP completed for two counties. c. Implementation of Chief Health Strategist role 	<ol style="list-style-type: none"> a. NYS Orleans County cohort ranking for Health Outcomes moves from 4th to 3rd quadrant b. NYS Orleans County cohort ranking for Health Factors moves from 4th to 3rd quadrant c. NYS Genesee County cohort ranking for Health Outcomes moves from 3rd to 2nd quadrant d. NYS Genesee County cohort ranking for Health Factors remains at least in 2nd quadrant
Collaborations and alignment (external)	<ol style="list-style-type: none"> a. Collaborative initiatives pursued b. Participation in county and regional activities (committees, boards, workgroups, etc.) 	<ol style="list-style-type: none"> a. Collaborative initiatives increase b. Public health components incorporated into County initiatives across the board
Resource development	<ol style="list-style-type: none"> a. Number of grants applied for b. Value of grants applied for 	<ol style="list-style-type: none"> a. Percentage of budget from non-county sources b. # grants received
Unified culture	<ol style="list-style-type: none"> a. Percentage of policies and procedures that are unified under GO Health instead of individual counties (e.g. rabies, invoicing, outreach) b. Percentage of employees that are shared across counties 	<ol style="list-style-type: none"> a. Employee recognition of GO Health b. Employee satisfaction measured by annual assessment tool c. External recognitions for public health excellence
Brand and impact	<ol style="list-style-type: none"> a. GO Health branded active engagement on aligned social media platforms b. Continuously updated GO Health website 	<ol style="list-style-type: none"> a. Significant community positive recognition of GO Health and its role based on survey responses

GO HEALTH STRATEGIES AND INITIATIVES

1. CAPACITY-BUILDING, PROGRAMS AND SYSTEMS:

GOAL 1.1. GO Health will achieve accreditation through the Public Health Accreditation Board (PHAB).

OBJECTIVE 1.1.1: By the end of May 2021 GO Health will have submitted a full application across all 12 domains into the E-PHAB accreditation portal.

Strategies

- a. Build systems, trainings and outcomes measurement capacity around PHAB standards in order to ensure compliance with expectations in the application process.
- b. Align the Workforce Development Plan around standards and outcomes
- c. Train and prepare staff, Board of Health and other identified stakeholders around expectations for the PHAB site visit.
- d. Continue to review standards and outcomes to determine viability and potential for updates.

GOAL 1.2. GO Health will maintain accreditation through the Public Health Accreditation Board (PHAB).

OBJECTIVE 1.2.1: By the end of 2021 GO Health will have received permanent accreditation through the PHAB.

Strategies

- a. Continue the use of domain teams to be accountable for planned processes and outcomes and responses to PHAB feedback.
- b. Ramp up utilization of the VMSG performance management system.
- c. Put processes in place to generate an annual report on progress within the domains and overall.
- d. Update the various plans, including this strategic plan, the Workforce Development Plan, and the Continuous Quality Plan.

GOAL 1.3 GO Health Departments will have administrative systems and processes that support effective and efficient operations.

OBJECTIVE 1.3.1: By the end of 2021 GO Health will have expanded integration and alignment of departmental operations and functions, including going paperless when appropriate.

Strategies

- a. Continue to overcome internal silos and find ways to have departments working together to address broader needs in the community as well as internal processes that can be improved. Continue to enhance the collaborative culture that is developing.
- b. Promote systems thinking throughout GO Health as a means of addressing internal and external challenges.
- c. Find ways to align the fiscal and budgetary requirements/processes of the two counties into one process for both.
- d. Build shared foundational platforms that can be expanded across multiple counties, especially in the areas of time-tracking, reporting, and procurement.
- e. Continue to move toward paperless processes and digital systems approaches.

f. Better utilize technology to support innovative programming.

GOAL 1.4 GO Health will have in place, implement, and evaluate/revise a continuous quality improvement (CQI) process and CQ Plan that positively impacts the health, safety, and well-being of the residents in our communities. [See appended CQ Plan for detail around the strategies below].

OBJECTIVE 1.4.1: By the end of 2021 GO Health will have QI embedded as a cultural norm across all divisions within the departments.

Strategies

- a. Use the planning process as a beginning framework for all team members to use to identify and drive quality improvement projects.
- b. Use the Community Health Improvement Plan (CHIP) as a guide to priorities within the CQI process.
- c. Utilize a performance management system designed to monitor and measure ongoing progress
- d. Use the plan-do-study-act (PDSA) cycle as the standard problem-solving approach for use in identifying and selecting problems that will be subject to QI.
- e. Develop staff and leadership capacity and competency to engage in continuous quality improvement.
- f. Ensure that every department has performance improvement processes and key performance indicators (KPIs), and are held accountable for same.
- g. Utilize the QI process to improve goals, procedures, and impact.



2. POPULATION HEALTH

GOAL 2.1: All people will be empowered to make educated decisions and have the opportunity to optimize their health.

OBJECTIVE 2.1.1: By the end of 2022 the GO Health education and outreach functions will be fully integrated.

Strategies

- a. Work with the Genesee Orleans Board of Health to examine existing county laws and policies and reconsider or update such laws/policies in the context of population health and changing expectations of county health departments.
- b. Work toward unifying and standardizing health education across the two counties. Become more proactive in health promotion.
- c. Coordinate all outreach efforts to make sure that they are complementary and reaching the appropriate targets.
- d. Develop and utilize proactive messaging campaigns to educate the public and distribute health information in timely ways.
- e. Utilize social media as a means to better reach our residents.

GOAL 2.2: GO Health will have a broad reach across the counties – engaging, connecting, and positively influencing diverse communities across the two counties for purposes of improving overall measures of population health.

OBJECTIVE 2.2.1: By the end of 2021 GO Health will have in place a baseline comprehensive analysis and understanding of health behaviors leading to chronic disease in the two counties.

OBJECTIVE 2.2.3 By the end of 2022 Genesee and Orleans counties will have improved in their overall county health ranking scores for both health factors and health outcomes.

Strategies

- a. Explore the potential to create evidence-based initiatives aimed at social determinants of health that affect key health behaviors: obesity/nutrition, tobacco use, and sedentary lifestyles.
- b. Explore the potential of telehealth and other tools for reaching more populations and improving access to health services in underserved areas.
- c. Engage with municipal governments to build relationships and levels of participation in SDH such as walkable communities and increased access to recreation.
- d. Find ways to include the public and non-traditional partners in the development and implementation of initiatives aimed at chronic disease behavior changes.
- e. Increase participation and impact of volunteers, including but not limited to:
 - ServNY volunteers
 - Volunteer Medical Reserve Corps (VALOR)

GOAL 2.3: GO Health will have a significant impact on addressing the multi-county (GOW) goals of (a) preventing chronic disease and (b) preventing opioid overdose deaths, as identified in the Community Health Improvement Plan (CHIP – Appendix F).

OBJECTIVE 2.3.1: By the end of 2021 the number of opioid deaths due to overdose will be reduced by 7% from 2019 rates in our counties. (CHIP – Appendix F)

OBJECTIVE 2.3.2: By the end of 2024 referrals to the New York State Smokers Quitline will have increased by 13.1% from 2019 rates in the GOW region. (CHIP – Appendix F)

OBJECTIVE 2.3.3: By the end of 2024 the percentage of GOW region women with an annual household income less than \$25,000 receiving breast screening based on most recent guidelines will have increased by 5% from 2019 rates in our counties. (CHIP – Appendix F)

OBJECTIVE 2.3.4: By the end of 2024 GOW region participation in Stanford University’s Diabetes Self-Management Program (DSMP) and the CDC’s Diabetes Prevention Program (DPP) will increase by 5% from 2019 rates. (CHIP Appendix F)

Strategies

See the CHIP (Appendix F) for details on multi-county approaches and priorities.



3. COLLABORATION AND ALIGNMENT

GOAL 3.1: GO Health will have, and enhance, collaborations with community partners and stakeholders that are aligned with shared goals and outcomes.

OBJECTIVE 3.1.1: By the end of 2021 there will be at least two new formal community collaborations in place.

Strategies

- a. Work with the GO Health Planning Council, Oak Orchard Community Health Center, Orleans Community Health Center, Rochester Regional Health, University of Rochester Medical Center (RMC) and Strong Memorial in identifying and addressing access to care and the medical needs of the counties as well as Buffalo health systems to address the needs of our residents on the west side of the county.
- b. Identify County-sponsored health and related functions that may be more effectively implemented and accessed through not-for-profit organizations. Work with unions and lawmakers to frame these opportunities and ensure positive outcomes.
- c. Work with community organizations targeting veterans' physical and mental health/behavioral health issues to improve access to services.

GOAL 3.2: GO Health will have collaborations in place across county and municipal programs to maximize the availability and impact of services.

OBJECTIVE 3.2.1: By the end of 2021 there will be at least two collaborations in place with county and municipal programs.

Strategies

- a. Work with school districts to address issues related to teen nicotine use, good nutrition, and sedentary behaviors along with other impactful issues.
- b. Coordinate with relevant community-based organizations (CBOs) and align systems approaches that address physical, emotional, and cognitive health of older adults and to ensure that individuals are not isolated. (see Appendix F - the Community Health Improvement Plan or CHIP)
- c. Coordinate with county mental health departments and other behavioral health partners to further integrate public health and behavioral health approaches. Where possible, share resources and create joint policies and procedures.
- d. Utilize the Hartford Foundation "Framework for Creating Age-Friendly Public Health Systems," and goals, to address key roles of GO Health. In addition, utilize the NYS "Health Across All Policies/Age-Friendly Roadmap."
 - Connect and convene multiple sectors and professions that provide the supports services, and infrastructure to promote healthy aging.
 - Coordinate existing supports and services to avoid duplication of efforts, identify gaps, and increase access.
 - Continuously collect data and report on community health status – including inequities – and aging population needs.
 - Conduct, communicate, and disseminate research findings and best practices to support healthy aging.
 - Compliment and supplement existing supports and services that integrate clinical and population health approaches.
- e. Utilize the intermunicipal staffing agreement across three counties (Genesee, Orleans, Wyoming) to provide staffing as necessary to carry out the public health mission.
- f. Continue to support and enhance regional coalitions. Ensure that there are MOUS in place with all WNY counties for preparedness purposes. These include but are not limited to the WNY Public Health Alliance and the University of Rochester Western Region Health Emergency Preparedness Coalition.



4. RESOURCE DEVELOPMENT

GOAL 4.1 GO Health will have sufficient and sustainable non-county funding sources to supplement support of under-funded State mandates and to support implementation of population health initiatives.

OBJECTIVE 4.1.1: By the end of 2022 at least 50% of GO Health total financial resources will be from sources other than County budgeted funds.

Strategies

- a. Pursue non-county grant funding to support the following priorities:
 - Establishing metrics and processes to monitor progress across the metrics.
 - Staff development and broader culture development with a systems focus.
- b. Pursue operational relationships with other counties, providing shared services arrangements that build on the strengths of our GO Health team while offering direct savings and efficiencies to the other counties.
- c. Create policies and systems that formalize the grant/budget application process using a team approach and build understanding of the “why” we are doing certain things.
- d. Maximize the base NY State aid reimbursements in both counties to enhance public health staffing and services.
- e. Maximize revenue streams for all billable services throughout all our programs.
- f. Pursue targeted grants that support a unified culture as well as specific programs (e.g. radon detection expansion, Get Fit) that are within the mission.
- g. Continuously develop ready-to-go white papers – especially around projects that can increase internal efficiency and effectiveness - and “shovel-ready” external projects.
- h. Pursue targeted job development opportunities such as PHAP with the CDC and NEHA for Environmental to bring on temporary staff at little to no cost to the counties. This will provide ‘trainees’ to work on various departmental projects that aren’t able to be done due to staff time limitations, learn public health and become a team member benefiting both the departments and the individuals who choose to come to our departments.



5. UNIFIED CULTURE

GOAL 5.1: GO Health will continuously maintain a well-trained workforce committed to a common mission, working cooperatively in a supportive work environment that encourages excellence.

OBJECTIVE 5.1.1: By the end of 2022 GO health will fully implement the WFD plan and will have a research – based assessment tool(s) in place to measure culture in the workplace.

Strategies [see Appendix E – Workforce Development Plan – for detailed responses]

- a. Continue toward a culture based on being a learning organization, providing shared learning opportunities and building public health competencies across the professional staffs in both counties.
- b. Move forward with the expectation that all employees – no matter the county – are available to be deployed as necessary within the region.
- c. Continue to build a GO Health oriented mindset, pursuing integration of effort and structural solutions that address the highest priority regional needs.
- d. Enhance internal communications by developing the equivalent of a multi-county intranet.
- e. Continue to formalize the unified staff development process, including but not limited to:

GO Health Strategic Plan (08.04.20)

- A shared annual performance review process.
- Identification/monitoring of staff strengths and development needs/interests.
- Technology skills across all available platforms.
- Assess job structure and parity including engaging DOH, counties and unions.
- Staff recognition

f. Continue to foster opportunities for staff to work collaboratively and creatively.

g. Improve the internship experience and attract quality interns who can provide value to GO Health.

h. Address evolving needs by updating the Workforce Development Plan on an annual basis. Address Improvements in the onboarding process, succession planning, and ongoing training and competency around new endeavors and policies.

i. Create and maintain an annual employee satisfaction survey.



6. BRAND AND IMPACT

GOAL 6.1: Branding and awareness initiatives will clarify our role and help to align attitudes and behaviors.

OBJECTIVE 6.1.1: By the end of 2020 a branding initiative and related supports (e.g. website, social media) will be operational.

Strategies

- a. Build a branding plan that leads to a more regional brand that is recognized as serving 100,000 people rather than two individual counties. Ensure clear messaging to the public about the relationship between the health departments and also about the services that are offered.
- b. Clarify the concept of “chief health strategist” in the context of the positioning statement. Embody the concept of positioning as an expert with the best understanding of regional needs and potential strategies for addressing those needs.
- c. Continuously clarify and communicate the value of public health initiatives, demonstrating the return on investment in both financial terms and quality of life.
- d. Move toward a “one voice” approach where any communication (internal and external) that pertains to public health for both counties would come from a single source. Internal communications will be distributed to all employees of both counties from that single source.
- e. Create and maintain an annual community survey to monitor community recognition of the GO Health brand and role of the health departments.



APPENDICES

- A. Overview Analysis 2019
- B. One-Page GO Health Plan Summary
- C. Lexicon of Planning and Public Health Terms
- D. Continuous Quality Plan
- E. 2020-25 Workforce Development Plan
- F. Community Health Improvement Plan
- G. Planning Team Members and Board of Health