

Cumberland County Department of Public Health

STRATEGIC ACTION PLAN

2021-2022



June 2021

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Letter from the Health Director

Cumberland County Department of Public Health (CCDPH) provides the three core functions of public health: assessment, policy development and assurance. The jurisdiction of CCDPH includes Cumberland County's nine municipalities and unincorporated areas.

The Cumberland County Department of Public Health's 2021-2022 Strategic Plan is intended to identify the key issues affecting the health of Cumberland County residents and the CCDPH staff and to guide the planning and implementation of the activities of the Community Health Assessment's Action Plans.

Strategic planning is a process of defining its direction and making decisions on how an organization distributes its resources to include its capital and people. It is a step-by-step process which defines the organization's goals and objectives with an end strategy that can be implemented and evaluated.

This document details the Health Department's strategic planning efforts along with the planning and implementation process. This effort started with a retreat for Cumberland County Board of Health (BOH) members in which they reviewed the prioritized community health issues and concerns, and completed a SWOT (Strengths, Weakness, Opportunities, and Threats) analysis. Based on the assessments, board members selected priorities that CCDPH staff will focus. A strategic planning team comprised of CCDPH staff members from all levels developed the Board's priorities into specific goals, objectives, and action steps.

March of 2020 shifted the way the health department provided services due to the increased restrictions due to COVID-19. Despite this emerging virus, the work of the strategic planning team did not stop. However, the plan needed to be shortened from a traditional 3-5-year plan to a two-year plan given the COVID-19 environment. The Cumberland County Department of Public Health did not stop operations and still held up COVID-19 response efforts including contact tracing, testing, vaccinations, while maintaining regular day to day programs.

We invite you to stay up to date and engaged on the implementation of Health Department's strategic plan on the Cumberland County website at [CumberlandCountyNC.gov](https://www.cumberlandcountync.gov), social media platforms, and Board of Health meetings held the third Tuesday of each month at 6 p.m.

Contributors

Each local public health agency in North Carolina has a governing board that has responsibility for public health within its jurisdiction. A local board of board of health in the policymaking, rule-making, and adjudicatory body for public health in the county.

Board of Health Members

Dr. Olusola Ojo, Chair
Pharmacist

Dr. Cynthia McArthur-Kearney, Vice Chair
Registered Nurse

Dr. Connette McMahon
Active OBGYN

Dr. Jeannette Council
Commissioner

Ms. Sonja Council
Public Representative

Ms. Stacy Cox
Public Representative

Dr. Kent Dean
Veterinarian

Dr. Sam Fleishman
Physician

Mr. John Larch III
Professional Engineer

Dr. Kingsley Momodu
Dentist

Dr. Hakkam Alsaidi
Optometrist

Senior Leadership Team

Dr. Jennifer Green
Health Director

Ashley Curtice
Deputy Health Director

Dr. Lori Haigler
Medical Director

Dr. Krystle Vinson
Director of Nursing

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Strategic Planning Team

Administration

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Andrea Wallace-Williams

Health Education

Stepheria Hodge-Nicholson
Tamra Morris

Communicable Disease

Amichia Gainey-Jones
Lekita Williams

CMARC/CMHARP - Care Management for At-Risk Children/Case Management for High Risk Pregnancy

Akua Peprah

Environmental Health

Charlisa Davis

Nursing

Kimyetta McNeill

WIC

Sheena Butler

Healthiest Cities and Counties Grant

Gwen McNeill

Core Functions of Public Health

The work of Public Health is organized around nationally developed core functions and the 10 Essential Public Health Services, which are the basis of public health practice. The three core functions of Public Health are Assessment, Policy Development and Assurance. A revised framework for the 10 Essential Public Health Services was released in September 2020.

Assessment

Public health programs and system evaluations are an important governance function. Evaluations provide feedback to the governing bodies on the effectiveness and efficiency of essential public health services being carried out in local public health centers.

Policy Development

The governing body accomplishes its responsibilities by establishing public health policies and assuring their implementation. Public health policies may be either a regulatory or a non-regulatory action. Public health policy development refers to a governing body articulating, in writing, expectations for accomplishing public health goals, measurable objectives, and the expected results that are to be achieved.

Assurance

Assurance refers to those functions carried out by the governmental presence at the local level that guarantee public health policies and programs are in place and working. The governing body may guarantee public health services by providing them directly, or by making sure that essential public health services are available at the local level through other means. The governing body must assure that some authority is responsible for overseeing and providing public health services at the local level.

At the center of the Essential Public Health Services is equity. The aim of these services is to actively promote policies, systems, and overall community conditions that enable optimal health for all and seek to remove systemic and structural barriers that have resulted in health inequities.

10 Essential Public Health Services

Assessment

1. Assess and monitor population health status, factors that influence health, and community needs and assets
2. Investigate, diagnose, and address health problems and hazards affecting the population

Policy Development

3. Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it
4. Strengthen, support, and mobilize communities and partnerships to improve health
5. Create, champion, and implement policies, plans, and laws that impact health
6. Utilize legal and regulatory actions designed to improve and protect the public's health

Assurance

7. Assure an effective system that enables equitable access to the individual services and care needed to be healthy
8. Build and support a diverse and skilled public health workforce
9. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement
10. Build and maintain a strong organizational infrastructure for public health

Mission, Vision & Core Values

OUR MISSION

To provide high quality service in a professional, efficient, and fiscally responsible manner while improving the health of Cumberland County.

OUR VISION

To have healthy people living in a healthy community.

CORE VALUES

CCDPH follows the County core values of **PRIDE**

Professionalism

Respect

Integrity with accountability

Diversity

Excellent Customer Service

Recognizing that all people are different, we treat everyone with dignity and serve our diverse population with professionalism, respect, integrity, diversity and excellent customer service (PRIDE).



Community Health Assessment 2019

In 2018, Cumberland County completed its first Eastern Regional Community Health Needs Assessment (CHNA). The CHNA offers a regional comprehensive picture of health, needs and resources in the community and its surrounding counties. Its goal is to describe the health needs of our community and surrounding counties, to develop and identify strategies within the region to address the need. The CHNA is the foundation for all local public health strategic planning, priorities, coordinated community action plans, and evaluation. This assessment is conducted every three to four years to meet requirements for accreditation for both local health departments and non-profit hospitals.

Primary data is collected through the distribution of the Eastern Regional Community Health Assessment opinion surveys and focus groups. Surveys measured health indicators to assess the attitude, awareness and perception which impact Cumberland County's community overall quality of life along with 33 additional eastern counties in North Carolina. Secondary data was collected from an array of local, state, national and federal data sources. Conduent Data Management Group analyzed data from both sources. The local public health leaders discussed outcomes, ranked the priorities, and developed a community health improvement plan.

The top three ranked priorities for 2016 were:

1. Reduce the Burden of Chronic Diseases
2. Reduce Sexually Transmitted Infections/Teen Pregnancy Prevention
3. Reduce Substance Abuse and Drug Addition

The top five ranked priorities for 2018 were:

1. Access to Health Services
2. Economy
3. Exercise, Weight, and Nutrition
4. Public Safety
5. Substance Abuse (Misuse)

Health Priorities

After receiving the completed Community Health Needs Assessment (CHNA) from Conduent HCI, a Cumberland County Community Coalition was organized to determine CHNA priority areas. The Community Coalition invitees included community leaders, private practitioners, behavioral health providers and representatives from public health agencies, businesses, hospitals, and academic centers.

After examining the results of the CHNA survey (primary data) and secondary health data, the Community Coalition selected five health priorities for the 2019 CHNA process: Access to Health Services; Economy (employment, housing, food security, and living below poverty); Exercise, Weight, and Nutrition; Public Safety, and Substance Abuse.

Quality Improvement (QI)

CCDPH engages in a quality improvement process yearly. QI is the use of a deliberate and defined improvement process, such as Plan-Do-Check-Act (PDSA). PDSA is a process focused on a continuous effort to improve the efficiency, effectiveness, performances, accountability, and outcomes of health department programs and services.

There is a QI team that works with CCDPH departments to create a yearly project that directly ties to the goals and objectives outlined in this Strategic Plan. See QI plan [here](#) on our website for more information.

Summary of Strategic Planning Process

Beginning in January 2020, the Cumberland County Board of Health and the CCDPH staff underwent a yearlong strategic planning process. A summary of the strategic planning process is outlined in this section.

In February 2020, the Board of Health gathered for a retreat to set strategic priorities for the CCDPH. Cumberland County Assistant County Manager, Sally Shutt, facilitated this process for the Board of Health. Prior to, and during the retreat, Board of Health members were provided an overview of relevant national, state, and local data including Healthy North Carolina 2030, Robert Wood Johnson County Health Rankings, the CHNA, and the annual State of the County Health (SOTCH) Report.

After a discussion of the data, board members participated in a **SWOT** (Strengths, Weakness, Opportunities, and Threats) analysis. A SWOT analysis identifies both internal and external factors that may impact an organization. Strengths are internal positive attributes of the organization and weakness are internal attributes that may hinder the success of an organization. Opportunities are external factors that may facilitate the activities of the organization, while threats are external factors that may prevent the organization from meeting its goals.

Board members used a nominal group process to brainstorm priorities individually and then in small groups. Each group reported to the full Board their list of identified priorities. After each group resented, the full list of priorities was then discussed by the Board of Health. The Board developed a narrowed list of four externally focused priorities and three internally focused priorities. The Board voted to approve these priorities. These priorities were reported to the Board of County Commissioners, to Cumberland County staff, and to the public.

Due to a shift in focus to the COVID-19 Pandemic, the strategic planning process was put on hold between March 2020 and May 2020. In May 2020, strategic planning activities were reinitiated. While many traditional strategic plans are three to five years, this plan was developed as a short-term two-year plan due to COVID-19. The department will engage in a longer more extensive strategic planning process in future years.

CCDPH staff established a **Strategic Planning Team** to develop timebound and specific goals and objectives based on the board approved priorities. There was an intentional effort to recruit staff members from all levels of the department and from each program in the agency as all CCDPH staff were eligible to be members of the Strategic Planning Team. The Strategic Planning Team convened monthly between June and November to develop specific goals and objectives for each internal and external priority developed by the Board of Health. Updates were provided to CCDPH in the department's weekly newsletter and during all staff meetings. Staff had the opportunity to provide feedback on developed goals and objectives via the department's anonymous Digital Solution Box.

During the November 2020 public Board of Health meeting, staff presented the developed goals and objectives for Board members. In December 2020, the Board of Health provided an opportunity during the monthly meeting for the public to provide input on the developed strategic plan. In November and December, the Strategic Planning Team used this feedback to develop "worksheets" with specific action steps, resources, and responsible parties for implementing the internal and external goals and objectives (see example in Appendix A) The Board of Health approved the final Strategic Plan during the March 2021 Board of Health meeting.

Activity	Feb. 20	May 20	Jun. 20	Jul. 20	Aug. 20	Sep. 20	Oct. 20	Nov. 20	Dec. 20	Jan. 20	Feb. 21	2021-2022
Board of Health Retreat - Established Strategic Priorities	X											
Final Report on FY 19-20 Board of Health Goals		X			X							
Strategic Planning Meetings			X	X	X	X	X	X	X	X		
Recruit and Establish CCDPH Strategic Planning Team		X	X									
Drafted internal Goals/Objectives Selected and Submitted for Staff input				X								
Finalize goals/Objectives/Strategies and Responsible party for internal priorities					X							
Drafted external Goals/Objectives Selected and submitted for staff input					X							
Finalize goals/Objectives/Strategies and Responsible party for external priorities						X						
Board of Health Meetings												
Present goals and objectives/available for public input						X						
Present draft strategic plan for approval/available for public input										X		
All Staff Meetings/Communication												
Updates during weekly update/available for feedback			X	X	X	X	X	X	X	X	X	X
Written strategic plan drafted										X		
Final strategic plan published											X	
Quarterly Strategic Planning Updates												X
Annual Reports												X

Board of Health Priorities

Based on extensive input from the community through the Community Health Assessment, the Board of Health Retreat, the CCDPH staff and the strategic planning team and public comment, the Board of Health selected the following priorities.

The Board of Health agreed to four **external**, or community focused, priorities for the short and long term:

- Increase partnerships and collaboration with groups from various sectors, including academic, military, healthcare and faith-based organizations
- Expand mental health and substance abuse services
- Improve health literacy through expanded communication platforms and school outreach efforts
- Explore expanding community access to the Health Department services

The Board of Health also established **internal** priorities for the department:

- Increase staff recruitment and retention, assess employee satisfaction and improve morale
- Improve quality and efficiency of services through Electronic Health Records and other methods
- Expand outreach through Health Department specific social media platforms

Goals and Objectives

The Strategic Planning Team developed goals and objectives for each priority established by the Board of Health. Goals and objectives establish criteria and standards against which you can measure the performance of the strategic plan. A goal is a broad statement about the long-term expectation of what should happen as a result of your program (the desired result). Objectives are statements that describe the results to be achieved, and the manner in which they will be achieved. SMART attributes were used to develop clearly-defined objectives. These attributes include:

Specific, Measurable, Achievable, Relevant or Realistic, and Time-bound.

Internal Priorities

Priority 1:

Increase staff recruitment and retention, assess employee satisfaction and improve morale

Goal: Increase employee satisfaction

- **Objective 1:** By July 2022, 67% of staff perceive employee morale to be good or great (Note: Baseline data collected on the employee satisfaction by June 30, 2021)
- **Objective 2:** By July 2022, 70% of employees who agree or strongly agree there is effective communication with their direct supervisor
- **Objective 3:** By July 2022, 70% of employees who agree or strongly agree communication from Senior Leadership Team is effective
- **Objective 4:** By July 2022, 70% of employees who agree or strongly agree there is effective communication between health department programs
- **Objective 5:** By December 2021, 100% of supervisors will attend leadership or supervisor training within the first 12 months of hire.

Goal: Increase the number of new staff recruited

- **Objective 1:** By July 2021, CCDPH staff from 5 different departments will attend at least 4 recruitment events, annually
- **Objective 2:** By July 2022, the average time to hire will be no more than 3 months from the time the position is vacated
- **Objective 3:** By July 2021, 90% of supervisors will go through interview training and role play and will renew yearly
- **Objective 4:** By July 2021, increase the diversity of candidates selected to be interviewed

Goal: Decrease number of people planning to leave their position within two to three years for reasons other than retirement, based on survey data

- **Objective 1:** By December 2021, 75% of new positions will be posted with a salary within 3% of other counties in North Carolina to be competitive
- **Objective 2:** By June 2021, 70% of new staff will complete post hire check ins at 3, 6 and 12 months of hire. Note: The intent of these check-ins is different than monthly check-ins
- **Objective 3:** By June 2022, 85% of full-time positions are filled at any given time

Goal: Improve transparency and objectivity in performance reviews

- **Objective 1:** By June 2021, 80% of staff will have completed their annual summary of performance in the Performance System

Goal: Increase staff training and personal growth opportunities

- **Objective 1:** By June 2021, 80% of staff will have completed at least one training in the Learn System

Internal Priorities

Priority 2:

Improve quality and efficiency of services through Electronic Health Records (EHR) and other methods

Goal: Improve quality of services

- **Objective 1:** Within six months of Go-Live date 85% of clinical staff will use the selected EHR daily
- **Objective 2:** By July 2022, reduce the average no show rate across clinics by 3%
- **Objective 3:** By July 2022, each clinic will serve 75% of their target number of clients
- **Objective 4:** By July 2022, in each clinic, the average wait time from arrival is no more than 20 minutes after scheduled appointment time (Time from check-in with registration to being seen by nurse/provider)

Goal: Improve access of services through newEHR

- **Objective 1:** By July 2022, 50% of clients who identify as needing a mental health referral will have received a referral
- **Objective 2:** By July 2022, WIC will increase the average participation rate (percent of base caseload) by 5%. Baseline: 92.03% as of 9/24/2020
- **Objective 3:** By July 2022, at least one staff member in each department will make referrals via NCCARE360
- **Objective 4:** By July 2022, 20% of patients seen in the clinics will schedule appointments online within the patient portal

Goal: Improve efficiency of internal processes

- **Objective 1:** By July 2022, CCDPH will be able to pay for medical records online
- **Objective 2:** By July 2022, members of the public will be able to pay Environmental Health fees online
- **Objective 3:** By July 2022, 35% of Cumberland County death certificates will be filed within 5 days (average baseline is 30.4%)
- **Objective 4:** Within 6 months of Go-Live date with Energov, 85% of Environmental Health staff will use daily

Internal Priorities

Priority 3:

Expand outreach through Health Department specific social media platforms

Goal: Obtain/Utilize Social Media for the Health Department

- **Objective 1:** By July 2022, each health department program will have a monthly average of at least 2 unique posts/content
- **Objective 2:** By July 2022, individuals will spend an average of 1-2 minutes on health department links
- **Objective 3:** By December 2021, the health department will have an average of 100 views per social media posts
- **Objective 4:** By December 2021, the health department social media page will have 1000 followers across social media platforms

Goal: Create social media team for the Health Department

- **Objective 1:** By July 2021, CCDPH will create a social media team to implement social media for the health department
- **Objective 2:** By December 2021, 75% of health department programs will have a representative on the social media team

External Priorities

Priority 1:

Increase partnerships and collaboration with groups from various sectors, including academic, military, healthcare and faith-based organizations

Goal: Identify new needed partnerships in the community

- **Objective 1:** By January 2022, conduct at least 2 focus groups to identify areas where new community partnerships are needed
- **Objective 2:** By June 2022, identify at least 2 new agencies or coalitions to join

Goal: Strengthen Current Partnerships

- **Objective 1:** By December 2021, Triple P will engage with at least 3 new partners
- **Objective 2:** By April 2021, CCDPH will partner with P4P and the greater sector partnership and will create a listserv where groups can share community wide events and collaborate on projects
- **Objective 3:** By June 2022, host at least 10 events in collaboration with at least one other partner organization each year
- **Objective 4:** By June 2022, the Military Health and Readiness Initiative will have the first convening of partners and stakeholders to address tobacco use in the military

Priority 2:

Expand mental health and substance abuse services

Goal: Establish in house mental health and substance abuse services

- **Objective 1:** By July 2022, CCDPH will have at least host at least one psychiatry resident annually
- **Objective 2:** By July 2022, CCDPH will have in house substance abuse referral program

Goal: Utilize Increase referrals to mental health and substance abuse services

- **Objective 1:** By July 2020, 50% of clients who identify as needing a mental health referral will have received a referral
- **Objective 2:** By July 2022, the CCDPH Triple P program will train at least 2 mental health agencies to implement Triple P
- **Objective 3:** By July 2022, CCDPH will see a 5% increase in QuitlineNC referrals from behavioral health providers

External Priorities

Priority 3:

Improve health literacy through expanded communication platforms and school outreach efforts

Goal: Improve health literacy through expanded communication platforms

- **Objective 1:** By June 2022, 100% of school health nurses will have access to the language line via mobile devices to use in the schools
- **Objective 2:** By June 2021, CCDPH will provide Chronic Disease information on at least 2 platforms for community members to access
- **Objective 3:** By December 2021, at least 50% of printed materials will be at no higher than an 8th grade reading level and in both English and Spanish

Goal: Improve health literacy through outreach efforts

- **Objective 1:** By June 2022, include at least one health literacy question on the 2021 Community Health Assessment

Priority 4:

Explore expanding community access to the Health Department services

Goal: Improve Community perception of the Health Department

- **Objective 1:** By June 2022, 80% of those who take customer service survey, will report positive perception of the health department
- **Objective 2:** By June 2022, 100% of clinics will have offerings for telemedicine or telephonic appointments

Goal: Increase outreach efforts and secondary sites

- **Objective 1:** By June 2022, health department clinics and programs will expand their services in the community a least 4 times yearly
- **Objective 2:** By June 2022, CCDPH will obtain and utilize a mobile unit for at least 4 clinical and community outreach

Goal: Increase access to the health department

- **Objective 1:** By June 2022, explore expanding services by expanding hours of operations
- **Objective 2:** By June 2022, 10% of referrals will be made to mental health/substance abuse services in NCCARE 360
- **Objective 3:** By June 2022, increase WIC client caseload by 5 %
- **Objective 4:** By June 2022, 10% of CCDPH staff will make referrals via NCCare360
- **Objective 5:** By June 2022, 50% of patients seen in the clinics will schedule appointments online within the patient portal

Implementation and Tracking

Implementation and tracking of the strategic plan will begin in February 2021. Successful implementation of the strategic plan will take participation from all health department staff and collaboration with new and existing community partners. The Strategic Planning Team developed “worksheets” with specific action steps and resources needed to be successful. Resources include staffing, funding (new and/or existing), community partnerships, materials, supplies, etc. See example in Appendix. We anticipate these worksheets to be living documents that will be adjusted overtime based on funding, staff, and the availability of other resources.

For each strategic goal and objective these worksheets designate an associated “person responsible” within the CCDPH department or program that is directly affected by the goal or objective to guide implementation and keep the department on track to achieve its objectives within the identified timeframes. In addition to the “person responsible,” the Strategic Planning Team is split into three groups that are also assigned one internal and one external BOH priority. Each group will track the priority for the two years and report quarterly to the Health Director and Deputy Health Director during quarterly Strategic Planning Team Meetings. The strategy leads will be responsible for keeping plans up to date and meeting milestones. A more in-depth Strategic Planning Document has been created and used internally to guide progress (example seen in Appendix A).

Quarterly, the Board of Health will receive progress updates on specified goals and objectives. Board of Health (BOH) meetings are held the third Tuesday of each month at 6 p.m. The Board of Health members invite and encourage the public to join the BOH meetings virtually (or in-person as COVID-19 restrictions allow) and to provide ongoing feedback during the public comment period. An evaluation will be done on each goal and objective at the end of the two years to assess how successful the plan was, what barriers were encountered and to begin planning for the next three years. A final report will be made available on the Health Department website at CumberlandCountyNC.gov/health.

Appendix A: Strategic Planning Team Documents and Worksheets

Sample Internal Tracking Spreadsheet

Priority 3: Improve health literacy through expanded communication platforms and school outreach efforts
Goal 1 : Improve health literacy through expanded communication platforms
Objective 1: By July 2022, 100% of school health nurses will have access to the Language Line via mobile devices to use in the schools
Strategy 1: Assess current funding and grant opportunities to supply the mobile devices.
Strategy 2: Train school health nurses on using the Language Line
Objective 2: By June 2021, CCDPH will provide chronic disease information on at least two platforms for community members to access
Strategy 1: Utilize EHR for patients to contact with questions about their medications, etc., and send out a easy to understand breakdown document for the patient to use
Strategy 2: Create a FAQ section on the websitefor chronic condition questions (hypertension, diabetes, substance misuse, etc.) most prevalent in Cumberland County
Objective 3: By December 2021, at least 50% of printed materials will be at no higher than an 8th grade reading level and in both English and Spanish
Strategy 1: Establish materials and handouts for clinics to utilize when discussing conditions with patients in both English and Spanish
Goal 2: Improve health literacy through outreach efforts
Objective 1: By June 2022, include at least one health literacy question on the Community Health Assessment
Strategy 1: Fireside Chats quarterly that will address health concerns, strategies for improvement and available resources
Strategy 2: Implement evidence-based health literacy interventions https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/health-literacy-interventions
Strategy 3: Promote health literacy videos on social media/play in waiting rooms (Questions to Ask Your Doctor) https://www.ahrq.gov/questions/index.html
Strategy 4: Distribute health literacy materials to provider offices
Strategy 5: Distribute health literacy materials for churches, community agencies and nursing homes

Person Responsible Worksheet

Priority #? Internal or External?	Goal?	Objective #?	Who's Responsible?	Resources Needed?

Sample Internal Priority Spreadsheet

Priority: Increase staff recruitment and retention, assess employee satisfaction and improve morale			
Goal: Increase employee satisfaction			
Objective:			
Internal/External Partners Needed		Resources	Group Responsible
Internal	External		

Sample External Priority Spreadsheet

Priority: Increase partnerships and collaboration with groups from various sectors, including academic, military, healthcare and faith-based organizations			
Goal:			
Objective:			
Internal/External Partners Needed		Resources	Group Responsible
Internal	External		



Department of Public Health