

2006 - 2010 Strategic Plan

Washington County Health Department

Adapted from original 2000-2005 Five-Year Plan

Reviewed by Health Department Staff: May 2, 2006

Reviewed by Board of Health: September 20 and October 12, 2006



Mission Statement: The Washington County Health Department strives to preserve and promote health for all; prevent disease, injury, and premature death; and protect the public – ensuring conditions in which all can be safe and healthy.

Promote Health ***Prevent Disease ***Protect the Public

Major Focus Area A: Communicable disease control and surveillance

Strategic Goal 1: The public's health in Washington County will be protected from preventable communicable diseases.

Performance Goal:

- Children in Washington County will be protected from vaccine preventable communicable diseases.

Focus Area B: Environmental Health or Human Health Hazard Control

Strategic Goal 2: The Washington County public has protection from unhealthy environmental conditions where they live, work and play in Washington County.

Performance Goal:

- County ordinance(s) pertinent to the public's health are reviewed & revised regularly to promote efficient and timely protection of the public ensuring children are protected in an expedient manner when lead hazards are identified in their environments and the public is protected in an expedient manner from human health hazard(s).

Focus Area C: Disease and Injury Prevention

Strategic Goal 3: The public's health in Washington County will be protected and promoted through prevention information and activities.

Performance Goal:

- Services and programming focus on prevention of the known leading causes of injury, disease, and disability in Washington County.

Major Focus Area D: Health Promotion

Strategic Goal 4: The public's health in Washington County will be protected and promoted through health promotional information and activities

Performance Goal:

- Information about factors known to affect health and well-being is disseminating to the public including WIC participants who will have timely access to nutritional education and counseling to achieve improved dietary practices as well as supplemental nutritious foods.

Major Focus Area E: General Public Health Nursing Program

Strategic Goal 5: Public health needs will be balanced with community resources/capacity in Washington County.

Performance Goal:

- Regular assessment of the public's health by the public health system (including a wide variety of public and private partners and the Board of Health) to be aware of groups with unmet needs, diversity, barriers, and assets in the community and identify priorities the public health system and/or public health department can address.

Appendix A indicates programs/services related to focus areas & goals

Appendix B indicates programs/services related state & local health plan indicators

Appendix C indicates essential services related to focus areas

Appendix D indicates *Healthy People 2010* goals & objectives related to focus areas

Appendix E indicates annual number of state performance measures related to focus areas

Appendix F indicates action steps for implementation over 5 years related to focus areas

APPENDIX A

Programs and Services by Major Focus Area as outlined in WI Statutes

A. Communicable Disease Control and Surveillance

Communicable disease investigations and reporting
TB testing /case management- TB Dispensary Status 6/2005
Immunization program/coalition
Influenza surveillance and coordination
STI & Hepatitis Counseling
HIV & AIDS partner notification program – Waukesha County does as of 2009
Disaster Preparedness/coalitions – changed from Quad Counties to Five Counties in 2010

B. Environmental Health (Human Health Hazard Control)

Lead risk assessment/screenings
Radon information center/screenings
Human health hazard and nuisance investigation
Rabies control coordination
Safe food handling information
Beach water testing/posting
Water testing for selected wells—DNR subcontract added 2007
Licensed facility inspections for selected establishments– DPH subcontract added 2007
Full Agent Program 2010

C. Disease & Injury Prevention

Wisconsin Well Women Program/coalition
Tobacco control services/coalition- discontinued as of 2010 (MJC)
Injury control services/coalition
Physical Activity & Nutrition coalition - 2007

D. Health Promotion

Women Infant Children (WIC) Supplemental Food Program
Web page, department displays, presentations, media
Committee & coalition memberships

E. Public Health Nursing Services

Community Health Improvement Process
Maternal/newborn health services including
 Prenatal/postpartum
 Teaching and education
 Case management services
 Referral to community resources
Pregnancy testing

Other

Community Options Program assessments – ADRC replaced
Loan closet equipment – discontinued 2009
Protective Services assessments with DSS – as needed only

Appendix B - Relationship of ten-year State & Local Health Plans to Health Department Services

State Plan Long-term Objectives

- 1-Access to primary and preventative health services
- 2-Adequate and appropriate nutrition
- 3-Alcohol and other substance use and abuse
- 4-Environmental and occupational health hazards
- 5-Existing, emerging, and re-emerging communicable diseases
- 6-High risk sexual behavior
- 7-Intentional and unintentional injuries and violence
- 8-Mental health and mental disorders
- 9-Overweight, obesity, and lack of physical activity
- 10-Social and economic factors that influence health
- 11- Tobacco use and exposure

Local Plan Long-term Objectives

- A-Access to Health Care
- B-Nutrition
- C-Inappropriate Use/Abuse of Alcohol and other
- D-Environmental/Occupational Health
- E-Communicable Diseases New and Emerging
- F-High-Risk Sexual Behavior
- G-Intentional & Unintentional Injuries & Violence
>
- H-Mental Health
- I-Obesity and Lack of Physical Activity
- J-Social/Cultural/Familial/Spiritual
- K-Economic Factors Affecting Health
- L-Tobacco Usage/Exposure

Major relationships in **bold**

Health Department Programs and Services by Major Focus Area	<i>Healthiest Wisconsin 2010 Health Priority</i>	<i>WC Community Health Improvement Plan</i>
Focus Area A - Communicable Disease		
➤ Reportable Communicable Disease follow-up	5	E
➤ Emerging CD control and surveillance)	5	E
➤ TB testing/case management	5	E
➤ STD & Hepatitis counseling	1, 5 , 10	A, E , J, K
➤ HIV & AIDS Partner Notification	1, 5 , 10	A, E , J, K
➤ Refugee follow-up	1, 5 , 10	A, E , J, K
➤ Immunization Programs	1, 5	A, E
➤ Community Immunization Coalition	5	E
➤ Disaster Preparedness	1, 2, 4 , 5 , 10, 11	A, B, D , E , K, L
Focus Area B - Environmental Health		
Radon Information Center Services	4	D
Human Health Hazard and Nuisance Investigations	4 , 10, 11	D , J, K, L
➤ Lead Risk Assessments	4	D
➤ Rabies Control Coordination and follow-up services	4	D
➤ Beach Water Testing	4	D
➤ DNR well water testing -2007 added	4	D
➤ Limited Agent inspections -2007 added	4	D
Focus Area C Disease and Injury Prevention		
Wisconsin Well Woman Program and Community Coalition	1	A
Tobacco Control Services and Community Coalition	10, 11	J, K, L
Injury Control Services and Community Coalition	7	G
Physical Activity & Nutrition Coalition – 2007 added	9	I
Focus Area D Health Promotion		
Women, Infants and Child (WIC) Supplemental Food Program	1, 2, 9	A, B, I
Committee and Community Coalition Participation	ALL	ALL
Information Dissemination	ALL	ALL
Focus Area E Public Health Nursing		
Community Assessments	ALL	ALL
Maternal Child Health and Prenatal Care Coordination	ALL	ALL
Other Public Health Services		
Community Options Program Assessments	10	J, K
Protective Services Assessments	10	J, K
Loan Closet	10	J, K
Child with Special Health Care Needs services/referrals	1	A

Services reviewed for need and continued relevance at least twice annually with budget preparation and year end report.

Appendix C

Essential services of Public Health related to Health Department Focus Areas

Essential Service	Focus A	Focus B	Focus C	Focus D	Focus E
1	X	X	X	X	X
2	X	X	X	X	X
3	X	X	X	X	X
4	X	X	X	X	X
5		X	X	X	X
6	X	X	X	X	X
7	X	X	X	X	X
8					X
9		X	X		X
10				X	X
11	X	X	X	X	X
12			X	X	X

Essential Service(s):

- 1-Monitor health status to identify community health problems
- 2-Identify, investigate, control and prevent health problems and environmental health hazards in the community
- 3-Educate the public about current and emerging health issues
- 4-Promote community partnerships to identify and solve health problems
- 5-Create policies and plans that support individual and community health efforts
- 6-Enforce laws and regulations that protect health and insure safety
- 7-Link people to needed services
- 8-Assure a diverse, adequate, and competent workforce to support the public health services
- 9-Evaluate effectiveness, accessibility and quality of personal and population-based health services
- 10-Conduct research to seek new insights and innovative solutions to health problems
- 11-Assure access to primary health care for all
- 12-Foster the understanding and promotion of social and economic conditions that support good health

Appendix D indicates the federal *Healthy People 2010* goals & objectives related to the Washington County Health Department focus areas

	Focus A	Focus B	Focus C	Focus D	Focus E
Healthy People 2010 Goals	14	8	3, 12, 15, 27	11, 19	16, 23
Healthy People 2010 Objectives	14-22	8-11	3-13, 12-12, 12-15, 15-13, 15-20, 27-1, 27-2, 27-6	19-3	16-6, 23-12c

Appendix E Annual Performance Measures

Annual performance measures are negotiated with the state DPH for categorical funds and reflect successful progress towards Focus area goals. The numbers below reflect the number of objectives negotiated for each year related to the Focus Areas. The specific objectives are documented in the state's GAC system.

Year	2001	2002	2003	2004	2005
Focus area: A Communicable Disease	5 objectives	2 objectives	3 objectives	10 objectives	3 objectives
Focus area: B Environmental Health	1 objectives	3 objectives	1 objectives	2 objectives	1 objectives
Focus area: C Disease and Injury Prevention	7 objectives	10 objectives	9 objectives	5 objectives	8 objectives
Focus area: D Health Promotion	5 objectives	2 objectives	2 objectives	2 objectives	1 objectives
Focus area: E Public Health Nursing	3 objectives	3 objectives	2 objectives	3 objectives	1 objectives

Year	2006	2007	2008	2009	2010
Focus area: A Communicable Disease	4 objectives	11 objectives	8 objectives	10 objectives	14 objectives
Focus area: B Environmental Health	2 objectives	3 objectives	2 objectives	2 objectives	2 objectives
Focus area: C Disease and Injury Prevention	5 objectives	7 objectives	7 objectives	4 objectives	1 objective
Focus area: D Health Promotion	2 objectives	1 objective	1 objective	1 objectives	1 objective
Focus area: E Public Health Nursing	1 objectives	1 objective	1 objective	1 objectives	3 objectives

Appendix F: action steps for 2006-2010 towards implementation of goals
Reviewed annually with annual report

Goals	2006	2007	2008	2009	2010
Strategic Goal 1 Communicable Disease	89% CASA	83% CASA	Changed to measuring population CASA instead of caseload		
	<ul style="list-style-type: none"> • Maintain TB Dispensary Status: develop electronic billing procedures, explore capacity to provide new Quantiferon tests – done • Explore providing phlebotomy services & need for lab certification – NA • Preparedness: develop and exercise plans, continue preparedness training of all HD staff, develop mobile registration system for disaster situations (mass clinic), maintain cross training of PHN, EHS & PHDS positions to maximize surge capacity, develop communications plan – ongoing/H1N1 successful • Preparedness: assure adequate number of just in time workers for mass clinic (county employees)- 2009 H1N1 volunteers • Participate in regional City Readiness Initiative with regional partners – ongoing closed POD exercise 2009 • Surveillance of immunization rates at population level through WIR – started 2007/2009 successful • Support continuation of or expansion of Public Health Data Specialist position (WEDSS electronic data reporting system, SPHERE, continual improvement of Lotus Notes system, new CD forms, ROSIE interface, etc. – ongoing & successful • Foster, maintain & support healthcare partners in jurisdiction (continue WC Health Care Partners Coalition and look for opportunities to improve rapid communication ability) – ongoing & successful • Decrease average hours per CD investigation to 5 or under per year – tracked in annual report • Develop new program for HIV/HEPC clients for rapid HIV testing – coordinate with Planned Parenthood for testing • Continue to promote proactive preparedness measures for community and individuals ongoing 				
Strategic Goal 2 Environmental Health	<ul style="list-style-type: none"> • Incorporate county beaches into inspection program as they are developed- done 3 beaches • Facilitate RS certification of 1 PHN as backup for EHS towards goal of 3 registered sanitarians – done 2009 • Monitor state DPH efforts to change licensed facility fees- done & lead to full agent ordinance accepted 6/2009 - started 2010 license year • Evaluate Limited Agent subcontracting opportunity –submit as part of 2007 budget process & evaluate for continuation or initiation of agent status application process in 1-3 years (started 2007-2009) • Increase communication & coordination with local municipalities – pass on model ordinances pertaining to health – good communication during H1N1 pandemic • Increase Environmental Health Education distributed to the Public (submit regular media articles)- doing better – good during H1N1 • Increase collaboration with Parks and Planning (i.e. abandoned manure pits code updates) – assisted with H1N1, Smart Growth and Map/Website project for HPP • Promote SMOKE-FREE environments for all residents including county grounds-state law passes in 2009 to be effective 6/2010 for public workplaces • Standardize air & water quality complaints information for distribution to public ongoing • Submit capital improvement proposal for water laboratory (water testing)- continue to evaluate 				
Strategic Goal 3 Disease & Injury Prevention	<ul style="list-style-type: none"> • Transition WWWP to decreased caseload per state guidance, monitor program status, monitor available funding levels and assure high quality care to clients – ongoing • Maintain tobacco grant funding level and quality services – ongoing – new Health Educator hired 2008 – 2010 MJC with Fond du Lac as fiscal agent • Expand 1:1 tobacco intervention services to become a model program- not done, but MCH clients smoking during pregnancy has decreased • Educate Washington County municipalities on the benefits of local and statewide smoke-free work place initiatives – done • Expand Injury Coalition “Every 15 Minutes” drinking & driving initiative to a second community and then turn over to another agency or group – West Bend x2, Germantown , Hartford done – 2010 Kewaskum • Outreach to public – new booster seat legislation and educational materials –ongoing • Maintain low cost car seat programming – another DOT grant received in 2008 &2009&2010 • Maintain Permanent Fitting Station for car safety checks – ongoing • Establish a community coalition for obesity; poor nutritional choices and lack of physical activity - 2007 coalition active and attending state leadership training- 2010 HPP active coalition • Refine MCH/PNCC Home Safety materials ongoing • Support existing community drug & alcohols prevention efforts with coalition participation - done as needed or requested – good collaboration 				

Strategic Goal 4 Health Promotion	<ul style="list-style-type: none"> • Look for data interfaces between WIC ROSIE program and agency master client list – 2010 immunization interface between WICROSIE and DPH WIR • Evaluate need for WIC Peer Counselor position –subcontract with OZ Co 2007, WC 2009 hired x3 • Evaluate utilization of WIC vouchers- tracking participants who do not redeem checks at Farmers Market • Evaluate a new initiative for obesity, lack of physical activity and nutrition for general public – evaluate WIC materials for utilization and coordination –started HPP coalition 2007& ongoing - 2009 joint weight loss program offered for 1st time • Evaluate utilization of internet based education for clients – clients can complete education at home on pc and submit or email to WIC office • Maintain community coalition partnerships, evaluate usefulness & Identify outcomes that reflect coalition work and value ongoing • Utilize media to disseminate health information to public and targeted audiences - regular newspaper column/radio spot for Health Department ongoing H1N1 good coverage • Establish media committee from HD staff not done but have several saved media releases
Strategic Goal 5 Public Health Nursing Services	<ul style="list-style-type: none"> • Revise existing Community Health Improvement Plan for 2006-2010 and distribute -done 2006 • Conduct preparedness survey, analyze findings and distribute/utilize – done 2006, 2008 and 2010 • Distribution and utilization of annual state rankings documents –ongoing annually • Support evidence based practice for targeted MCH/PNCC clients –ongoing • Periodic meeting with interpreters to establish guidelines and “get to know you” session; hire staff for translation – Spanish; continue to translate documents into Spanish - hire an interpreter on staff or utilize a County interpreter – county pool 2007-ongoing successful • Utilize available information on increasing rates of premature births and impact –ongoing- document in annual report • Explore development of electronic or computerized Nursing Care Plan for MCH/PNCC clients – not completed –wait possible SPHERE changes • Development of survey at closure of PNCC/MCH cases to determine if desired outcomes met – attempted with limited results – wait for SPHERE redesign
Infrastructure Goals	<ul style="list-style-type: none"> • Implement a staff strategic thinking retreat as initial steps in revising 5 year plan for 2006-2010 – done May 2006 • Board of Health review of 2006-2010 CHIP – done July 2006 • Discuss dependence on levy vs. finding new funding streams – 2010 new renew with FSRL • Continuing assessment of staffing levels and ability to needs and achieve mission ongoing • Increase ¾ Public Health Data Specialist position to all levy funding (currently ½ levy and ½ grant) done 2007 • Increase ½ P.T. PHN ordinance position to ¾ ordinance position – not achieved • Add another ½ P.T. PHN ordinance position – done 2007 • Support concept of development of an integrated electronic system for Public Health through participation on state committees and providing input - ongoing • Measure and distribute data that reflects the outcomes of Health Department services to increase knowledge of HD and use of evidence based practice – ongoing with annual reports • Transition to required state systems without losing integrity of master client records and time and service reporting for local reports 2010 data analysis ongoing • Evaluate data, report results, revise strategies and adjust HD programs and services as necessary to meet mission and meet statutory requirements for a Level II Health Department - ongoing • Space utilization is at a maximum currently – if adopt agent status &/or add staff consider eliminating loan closet (find community partner to take over) – remodel in 2007 to allow expansion of loan closet and find additional office space – 2009 loan closet eliminated 2010 PAC remodel did not pass • Space utilization – water lab development – consider expanding HD into now storage area across from Office on Aging and adjacent to HD loan closet – library relocation 2007- 2009 County Space Study – on hold by county • Monitor new legislation impacting Public Health – ongoing, M. Schmelzer presentation 2-08 • Identify and implement Quality Improvement Initiatives – utilize best practice standards WIQI 2010 • Use NACCHO standard/tools to evaluate Health Department and Public Health System - 2010 accreditation tool review as part of WIQI • Schedule support and recognition for staff on routine basis- need to do better