

**CALHOUN COUNTY  
PUBLIC HEALTH DEPARTMENT**

**2024-2028  
Strategic Plan**





CALHOUN COUNTY  
**Public Health Department**

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190 E Michigan Ave  
Battle Creek, MI 49014

[calhouncountymi.gov/publichealth](http://calhouncountymi.gov/publichealth)  
269-969-6370

February 2024

On behalf of the Calhoun County Public Health Department, I am pleased to present our 2024-2028 Strategic Plan. As you will see, this plan aligns with our newly revised mission and vision.

Over the last several years, Calhoun County Public Health has experienced many challenges. From responding to a once in a lifetime pandemic to staffing shortages, these challenges have had a major impact on our ability to fulfill our mission: work to improve and protect the health and well-being of our communities by promoting healthy lifestyles and preventing disease.

In July 2023, our team began the process to address how we will meet these challenges. Several planning sessions were scheduled, and surveys were sent out to all staff, Board of Health members, Board of Commissioners, and key community partners. Several key points arose from the surveys including a need for increased external communications, alternative funding sources, public trust in public health, and trust in government overall. Because of this, the CCPHD determined the best path forward was to create a Strategic Plan that is focused on communication, funding, and infrastructural changes. This focus aims to strengthen our agency foundation and restore trust in public health to help achieve our vision of healthier people, environment, and communities.

Finally, I would like to thank all our staff that participated in various surveys and tabletops to help us complete this five-year plan. Their willingness to participate and engage was invaluable to the outcome of our Strategic Plan.

Sincerely,

A handwritten signature in black ink, appearing to read "Eric Pessell".

Eric Pessell, Health Officer



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## **Prelude**

### **Where have we been?**

The Calhoun County Public Health Department (CCPHD) has faced several challenges over the past few years. Most significantly, the impact of the COVID-19 pandemic response on staff well-being, reduced local public health provided services, and shifts in working arrangements. During and after the pandemic response, health departments, along with county governments, everywhere were facing challenges recruiting and retaining staff (especially within nursing), a mistrust in public health, an increased opioid problem, and a need to rebuild employee well-being.

Coupled with the pandemic response was a lack of CCPHD strategic direction. The overall mission of public health held strong throughout CCPHD, but the strategies to achieve the mission of disease prevention, health promotion, and protecting others were absent. There was a clear need for formal goals and strategies to fulfill public health's and our mission.

### **Where are we going?**

Looking to the future, the Calhoun County Public Health Department is preparing to apply for and obtain national accreditation through PHAB (Public Health Accreditation Board). As part of this process, CCPHD identified various needs beginning with developing a five-year Strategic Plan, creating a culture of quality improvement, and producing workforce development, branding, and communication plans. Each of these aims to build a stronger, more sustainable public health department that aligns with the 2023 Community Health Improvement Plan (CHIP). Within the workforce development plan, we plan to collaborate with Calhoun County Administration to look at various strategies for increasing employee recruitment and retention. Strategies may include creating innovative countywide employee programs such as such as the Infant at Work program originally piloted at the CCPHD.

Becoming the Calhoun County Chief Health Strategist will provide leadership around Calhoun County healthcare to continue implementing identified CHIP initiatives and lead future Community Health Needs Assessments (CHNA). The Chief Health Strategist will serve Calhoun County's citizens by building new and enhancing current partnerships to improve the health of the community. Partners working together will be able to achieve a much broader health indicator improvement success rate.

### **What is the importance of this Strategic Plan?**

The importance of this Calhoun County Public Health Department Strategic Plan is to provide CCPHD with a guide for identifying annual and ongoing strategies for the next five years. We intend for the Strategic Plan to be a guide for identifying annual and ongoing operational strategies.

To fulfill PHAB guidelines and our mission, this Strategic Plan focuses on accountability via formalized performance management; enhanced workforce development and well-being to include continued learning and process and policy improvement; defined marketing and branding strategies to spread the important work of public health; and program review, alignment, and development to support the 2023 CHIP initiatives.

Included in the 2023 CHIP are two prioritized health areas: Behavioral Health and Maternal, Fetal, and Infant Health. The CHIP workplans adjoin with strategies included in this plan of working collaboratively with new and existing community partners across multiple sectors.

One example of cross sector collaborations working to address mental health and mental health orders, and alcohol and drug use is the work being done to address the opioid crisis. CCPHD continues participating in the Opioid Steering Committee and serving as a co-lead on the Calhoun County Opioid Coalition. The work within each of these committees provides opportunities to expand our Project Access program throughout the county. Along with this, we continue working to improve maternal, fetal, and infant health through several of our programs including, but not limited to, Nurse-Family Partnership® and Infant Safe Sleep.

The Calhoun County Public Health Department 2024 Strategic Plan serves as a guide to fulfill our newly defined Mission, Vision, and Values Statements.



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## ***Calhoun County Public Health Department***

**Mission:** Calhoun County Public Health Department works to improve and protect the health and well-being of our communities by promoting healthy lifestyles and preventing disease.

**Vision:** Healthier people. Healthier environment. Healthier communities.

**Values:** As a public health agency, the Calhoun County Public Health Department is responsible for public health in the community, policy development to solve local health problems and address priorities, population health surveillance, and ensuring that everyone in Calhoun County has access to appropriate and cost-effective care.

- **Professionalism:** We maintain specialized knowledge in the practice of public health with a high standard of professional ethics.
- **Commitment:** We are dedicated to providing comprehensive public health services and guidance to our communities and partners.
- **Equity:** We strive for a community where everyone has a fair and just opportunity for optimal health.
- **People:** We respect our employees and those we serve.

### **Strategic Directions:**

- **Operations**
- **Planning**
- **Workforce**

### **Background**

The Calhoun County Public Health Department (CCPHD), under the direction of the health officer, Eric Pessell, determined the need to create a Strategic Plan to guide its activities for the next five years. This Strategic Plan will also serve as a CCPHD accountability tool to the public and to the people CCPHD serves ensuring identified goals are achieved. CCPHD's Strategic Plan provides transparency within the community when developing and communicating our top priorities. Internally, a Strategic Plan assists CCPHD leadership plan the resources and timeline required to achieve these priorities translating into the framework for CCPHD's Annual Budget. Annual goals, based on strategic priorities, are accomplished through the implementation of specific objectives and timeframes.

The agency's executive team coordinated the planning process and hired an external consultant to facilitate meetings and draft the initial plan. CCPHD internal participants included representation from all levels and all divisions within the department as evidenced in multi-level staff participation. The agency's staff participated in the planning process through their participation in the initial Strategic Planning survey and various meetings. County officials, Board of Health (BOH), and key community members were also survey participants.

### **The Strategic Planning Process**

In May 2023, CCPHD began its strategic planning process by disseminating the first of two SurveyMonkey surveys to all staff, government officials, Board of Health members, and community partners. This was a 13-question survey aimed to gather participant information on the current mission, vision, values, strengths, weaknesses, challenges, opportunities, and other items. A total of 49 responses were received.

The team held its first in-person planning session on July 19, 2023. During the initial session, the team received an overview of the Strategic Planning process and reviewed the proposed plan development timeline. Also, during the initial meeting, the team reviewed its mission statement and compared it to the survey responses received. After much discussion, the team developed a proposed mission statement then created a proposed vision statement for the organization. The team then turned its attention to the values. The CCPHD has a set of values and the team opted to continue to work on potential revisions between the first and second meetings. By the end of the first meeting, the team developed a draft Strengths, Weaknesses, Opportunities, and Challenges (SWOC) assessment and a proposed set of strategic priority areas to be further discussed and refined at the front-line staff meetings. The proposed strategic directions were:

- Workforce
- Operations
- Planning

On September 25, 2023, the front-line staff met in one of two identical (morning and afternoon) sessions. Both groups reviewed the information and draft materials provided and developed at the first meeting. Both sessions generated refinements to the priority areas as well as the goals and objectives for each, including potential strategies to achieve the objectives and ultimately the goals. Additional proposed versions of the vision statement were also developed.

The contracted consultant was then tasked with refining the objectives and strategies to be incorporated into the draft plan for team member review and comment.

A second SurveyMonkey survey was disseminated to staff asking them to rank the strategic directions and the corresponding objectives. The consultant and leadership team used the results to set timelines and deadlines for the objectives and determine which areas to focus on in the first year of the plan. The survey also asked staff to select one of the proposed vision statements and indicate their level of support for the proposed mission statement and agency values. A total of 48 responses were received.

In communications with the health officer, the consultant provided the survey results and draft plan. Upon review of the draft plan, Deputy Health Officer, Health Officer, and leadership team



members developed time-framed targets for the objectives and strategies included in the plan and fine-tuned the narrative. The final Strategic Plan draft was sent on April 22, 2024 to staff who participated in the July 19, 2023 first-strategic plan session. Staff provided their comments and feedback which was incorporated into the final Strategic Plan.

### **Staff Involvement**

The front-line staff of the department were provided the opportunity to participate in a Strategic Planning online survey that was conducted prior to the first planning session. Staff were asked to provide feedback on the current trends they see in the community, their vision for the health department, internal strengths and weakness, and external opportunities and challenges. The information gathered was used to develop the agency's vision statement and was instrumental in the SWOC analysis. (See Table 1)

After the priority areas and proposed objectives were developed, the staff were once again asked to participate in a second online survey to prioritize the goals and strategies to create the time-framed targets for the objectives. The first staff and community stakeholder survey garnered 49 responses and the second survey, which was sent to CCPHD staff, received 46 responses. Both the survey instruments and results are available upon request.

### **Community Partner and Stakeholder Engagement**

A total of 12 stakeholders that included county officials, Board of Health members, and community partners participated in the initial Strategic Planning survey that was used to develop the plan's priorities.

Once the plan was in the final draft stage, the plan was presented to The Coordinating Council (TCC) members . TCC members were presented the draft Strategic Plan in May 2024 and asked to review and provide any comment.

### **Alignment with CCPHD Organizational Plans**

#### **Calhoun County Health Needs Assessment and Community Health Improvement Plan**

In 2022, CCPHD collaborated with six partner organizations and Conduent Healthy Communities Institute to complete a Community Health Needs Assessment. From this assessment, eight priority health areas were considered for subsequent implementation planning which led to completion of a CHIP.

Most recently, CCPHD has been participating as a member of the 2025 Community Health Needs Assessment Steering Committee. The 2025 CHNA cycle is anticipated to be completed and published by December 2024. This cycle integrates extensive qualitative data through the completion of two community stakeholder listening sessions and numerous focus groups. CCPHD is leading focus group efforts with its team of Health Educators and Epidemiologists. The survey component of the CHNA is being translated into Spanish, Burmese, and Swahili to ensure accessibility and inclusivity.

In 2023, CCPHD, along with various partner organizations, led an effort to complete a CHIP. The foundational goals of the CHIP are to improve health equity and access to quality health services

in the areas of behavioral health and maternal, fetal, and infant health. Two priority areas were identified to be addressed.

1. Improve access to and quality of behavioral health services for all of Calhoun County.
2. Prevent pregnancy complications and maternal deaths and improve women’s health before, during, and after pregnancy.

The role of CCPHD varies from assurance to action. Implementation of this Strategic Plan will allow CCPHD to meet our workforce needs as well as find and provide the appropriate resources needed to implement strategies identified in the CHIP.

## **Planning**

We recognized a need to begin a concerted effort to create, implement, and train staff on a comprehensive and formalized Quality Improvement (QI) and Performance Management Plan and process, Workforce Development Plan, and Branding and Communication Plan. Each of these plans will provide guidance to all CCPHD staff as detailed below.

“QI is the use of a deliberate and defined improvement process, such as the PDSA (Plan, Do Study, Act) cycle, which is focused on activities that are responsive to community needs and improving population health. It refers to a continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes which achieve equity and improve the health of the community” ([MPHI, 2023](#)). A formalized CCPHD QI plan will provide this guidance to CCPHD staff to:

- Reduce costs or redundancy
- Eliminate waste
- Reduce cycle time; streamline processes
- Enhance ability to meet demands for services
- Increase customer satisfaction
- Improve employee morale
- Increase consistency
- Improve learning and increased knowledge
- Increase productivity
- Improve health status and outcomes

A formalized Performance Management (PM) system, via MiCalhoun.org, serves as a “one-stop source of population data and community health information for Calhoun County, Michigan.” The Strategic Plan, with its measurable objectives and strategies, will be a cornerstone for our QI and PM systems as we develop department-wide performance goals.

The Strategic Planning process also identified the need to create a Workforce Development Plan. Workforce is one of the strategic directions and includes the development and implementation

of the CCPHD Workforce Development Plan. A Workforce Development Plan aims to provide a clear and relevant workforce planning guide aligning staffing and competencies with CCPHD's current and future strategic goals. It includes workforce training and development strategies in quality improvement. Fundamental to this work is identifying gaps in knowledge, skills, and abilities through the assessment of both organizational and individual needs and addressing those gaps through targeted training and development opportunities.

The last piece is creating and implementing a Branding and Communication plan. While also included in our plan, it should be noted here that "Standardized branding and communications are created to strengthen and streamline the visual and written components of the CCPHD brand. A brand says that something is different about an organization—something worth more than 'just' a health department. People do not want just soda, they want Coca-Cola®. They do not want just tennis shoes, they want Nike®. In public health parlance, brand is equivalent to image, or an agency's personality. Brand is what community members, clients, policymakers, and other stakeholders think of the agency and say about it. It is also a promise an organization makes to the community and should drive the day-to-day efforts of employees to deliver the best possible client experience."<sup>1</sup>

### **External Trends and Events that Impact Our Work**

As evidenced in the SWOC analysis provided on the following page, the CCPHD has multiple external factors that potentially impact our work. Several opportunities and challenges as noted include rebuilding trust and educating the community in public health and its services, increasing services throughout the county, particularly in underserved communities, and increasing funding to address priority public health areas and programs. Both opportunities and challenges are addressed in the Strategic Plan.

The initial SurveyMonkey survey included a question asking participants to identify current trends impacting the CCPHD in the next five to ten years. The Word Cloud below illustrates the identified trends.

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<sup>1</sup> (n.d.). Just a moment... <https://www.naccho.org/uploads/downloadable-resources/Resources/BrandProcessGuide.pdf>

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political climate Harm Reduction  
mental health public health  
services need people Changing  
staff government **funding** high healthcare  
work pandemic  
**community health** Increased  
work home political

**TABLE 1**

<b>SWOC WORKSHEET</b>		
<b>INTERNAL</b>	<p><b>STRENGTHS</b></p> <ul style="list-style-type: none"> <li>▪ Team approach</li> <li>▪ Staff who are passionate, dedicated, and knowledgeable</li> <li>▪ Strong leadership</li> <li>▪ Willingness to work with community partners</li> <li>▪ Strong understanding of roles</li> <li>▪ Strong financial base</li> <li>▪ Different programs partnering together to meet patient/client needs</li> <li>▪ Desire to make CCPHD better</li> <li>▪ Longevity of staff who have been with CCPHD for more than 10 years</li> <li>▪ Supportive Board of Health and County Administrator</li> <li>▪ Diverse workforce</li> <li>▪ Flexible service delivery</li> <li>▪ Become a nationally accredited health department</li> <li>▪ Commitment to work/life balance</li> <li>▪ Commitment to technology improvements</li> <li>▪ Availability of multi-language interpretation services</li> <li>▪ Ability to work remotely</li> </ul>	<p><b>WEAKNESSES</b></p> <ul style="list-style-type: none"> <li>▪ Staff health and wellness</li> <li>▪ Lack of space</li> <li>▪ Technology system</li> <li>▪ Working remotely</li> <li>▪ High turnover with staff at CCPHD for less than 5 years and staffing shortages</li> <li>▪ Lack of standardized processes</li> <li>▪ Communication from leadership to frontline staff</li> <li>▪ Battle Creek Vs. Albion mindset with staff</li> <li>▪ Lack of diversity with POC staff</li> </ul>

<b>EXTERNAL</b>	<p><b>OPPORTUNITIES</b></p> <ul style="list-style-type: none"> <li>▪ Strong community support and collaborative spirit with state and local partners</li> <li>▪ Growth of mobile unit in rural areas</li> <li>▪ Building trust and repairing relationships</li> <li>▪ Increase services to underserved communities</li> <li>▪ Community health improvement plan implementation</li> <li>▪ Increases in state and federal funding to address priority areas</li> </ul>	<p><b>CHALLENGES</b></p> <ul style="list-style-type: none"> <li>▪ Increasing distrust in government/public health</li> <li>▪ Poor economic outlook</li> <li>▪ Vaccine hesitancy</li> <li>▪ Aging population</li> <li>▪ Political environment and resource allocations</li> <li>▪ Battle Creek vs. Albion mindset</li> <li>▪ Community does not know all of what we do</li> <li>▪ Lack of access to space to provide services</li> </ul>
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## **Strategic Plan Outline**

The plan outlined on the following pages is displayed in a table format to improve readability. The tables indicate each Strategic Priority Area highlighted in blue, Objectives highlighted in gray, and Strategies highlighted in yellow. Each priority area includes the metric/measure to be used to monitor progress.

## **Monitoring and Evaluation**

SMART(IE) objectives are noted in the tables and will be incorporated into MiCalhoun.org and utilized to stay on track each year of the plan. These will also provide opportunity to analyze and monitor the work accomplished each year via MiCalhoun.org as well as to identify any needed adjustments to timelines and activities need to be modified. Through MiCalhoun.org, CCPHD will continuously monitor progress toward goals and conduct a quarterly review on MiCalhoun.org. Additionally, CCPHD leadership and staff will conduct an annual review meeting to identify and present any major changes in the community that alters the direction of the Strategic Plan. As the Strategic Plan is reviewed, updated, or revised, specifics will be added as an Appendix to the original plan.

## **Communication**

Any adjustments made within the quarterly or annual reviews will be shared during regularly scheduled Board of Health and CCHPD all-staff meetings. Additionally, any changes or progress made will be shared in the monthly BOH/CCPHD updates that are sent to all staff and BOH members. Progress toward goal achievement will also be shared during these meetings as well.

## **Community Health Strategist**

Aligning with Public Health 3.0 to address population health, the CCPHD is transitioning to Chief Health Strategist for Calhoun County. In order to accomplish this, we plan to continue adopting and adapting strategies to combat the evolving leading causes of illness, injury, and premature death; adopting and implementing strategies for promoting health and well-being that work most effectively for communities of today and tomorrow; identifying, analyzing, and distributing information from new, big, and real time data sources; building a more integrated, effective health system through collaboration between clinical care and public health; collaborating with a broad array of allies, including those at the neighborhood-level and the non-health sectors to build healthier and more vital communities; replacing outdated organizational practices with state-of-the-art business, accountability, and financing systems; and working with corresponding federal partners (<https://www.naccho.org/uploads/downloadable-resources/CHS-Competencies.pdf>). Becoming Calhoun County's Chief Health Strategist also involves:

- Cultivating and mobilizing cross-sector partnerships in all communities throughout the county,
- Becoming PHAB accredited,
- Documenting public health success and making data accessible to document success, and
- Expanding financial support.<sup>1</sup>

Each of these strategies correlate with the CHIP and CHNA and are built into this 2024 CCPHD Strategic Plan

<b>Strategic Direction 1: Workforce</b>	
<b>Goal: Strengthen CCPHD workforce competency and capacity.</b>	
<b>Objective 1.1: Develop and implement recruitment and retention strategies.</b>	
<b>Strategies</b>	<b>Metric/Measure</b>
1.1.1 Create recruiting system that includes: <ul style="list-style-type: none"> <li>Referral, recruitment, and retention incentives for new hires</li> <li>Current employees recruiting for similar positions at job fairs</li> </ul>	<ul style="list-style-type: none"> <li>Recruiting/referral/retention system created and implemented by December 2025</li> <li>Annual review conducted and analysis completed on the number of applicants, new hires, and staff retention beginning December 2024</li> <li>Determination of incentive program completed by June 2025</li> <li>Annual Review of CCPHD position-specific job fair attendance record beginning December 2024</li> </ul>
1.1.2 Develop a formal internship program agencywide	<ul style="list-style-type: none"> <li>Internship program established and built into the CCPHD Workforce Development Plan and implemented by June 2025</li> </ul>
1.1.3 Establish a job description committee to review job descriptions and develop posting language	<ul style="list-style-type: none"> <li>Job description committee established by December 2024</li> <li>A minimum of 25 job descriptions reviewed annually beginning January 2025</li> <li>Job posting language developed and reviewed annually and put into place by June 2024</li> </ul>
<b>Objective 1.2: Develop and implement a CCPHD Workforce Development Plan by December 2024.</b>	
<b>Strategies</b>	<b>Metric/Measure</b>
1.2.1 Convene a multi-level staff committee to create a Workforce Development Plan that meets PHAB standards and measures including: <ul style="list-style-type: none"> <li>Creation of a performance review process that includes a professional development plan</li> <li>Creation of a standardized orientation/onboarding/training process for new employees</li> <li>Creation of a formalized continuing education program</li> <li>Creation of team building and employee well-being activities</li> </ul>	<ul style="list-style-type: none"> <li>Workforce Development committee convened by September 2024</li> <li>Workforce Development Plan developed and implemented by December 2024</li> <li>Orientation/onboarding process completed and implemented by September 2024</li> <li>Individualized continuing education program decided upon and included in employee performance evaluation plans by December 2025</li> <li>A minimum of two trainings and well-being activities completed annually with 75% of all-staff attending beginning December 2025</li> <li>A minimum of 75% of staff participated in well-being activities by June 2025</li> </ul>



1.2.2	Create a Quality Assurance (QA)/Quality Control (QC) review process in all CCPHD programs to determine staffing and training needs	<ul style="list-style-type: none"> <li>▪ QA/QC process developed within Workforce Development Plan by December 2024</li> <li>▪ QA/QC processed used to determine staffing needs as demonstrated in Executive Team meeting minutes beginning January 2025</li> </ul>
Objective 1.3: Administer an annual employee satisfaction survey.		
Strategies		Metric/Measure
1.3.1	Engage with a third-party to develop and administer an annual employee satisfaction survey to ensure anonymity	<ul style="list-style-type: none"> <li>▪ Survey administrator identified and selected by June 2024</li> </ul>
1.3.2	Develop with third-party an employee satisfaction survey by seeking employee input on survey questions and type (multiple choice, open-ended, rankings, etc.)	<ul style="list-style-type: none"> <li>▪ Survey questions developed and completed with staff input by September 2024</li> </ul>
1.3.3	Release employee satisfaction survey and gather results	<ul style="list-style-type: none"> <li>▪ Survey administered and results compiled annually beginning December 2024</li> </ul>
1.3.4	Review annual survey results with CCPHD Administrative Team and create a multi-tiered group to determine next steps	<ul style="list-style-type: none"> <li>▪ Survey results presented to CCPHD Administrative Team during Administrative Team meeting within 30 days of availability</li> <li>▪ CCPHD Administrative Team select staff for multi-tiered CCPHD group to further review survey and determine next steps during presentation meeting (within 30 days of results availability)</li> </ul>
1.3.5	Release annual survey results to all staff	<ul style="list-style-type: none"> <li>▪ Survey results released and next steps shared with all CCPHD staff within 15 days of Administrative Team meeting</li> </ul>
Objective 1.4: Administer continuous Health Equity, Inclusion, and Diversity training for all staff		
Strategies		Metric/Measure
1.4.1	Work with Calhoun County Human Resources and other partner organizations to determine and administer health equity, inclusion, and diversity training programs	<ul style="list-style-type: none"> <li>▪ Obtain and administer at least two training programs per year to all CCPHD staff by December 2024</li> <li>▪ Ensure at least 75% of all CCPHD attend identified trainings annually</li> </ul>

<b>Strategic Direction 2: Operations</b>	
<b>Goal: Formalize and enhance CCPHD operational processes.</b>	
<b>Objective 2.1: Create a quality improvement culture.</b>	
Strategies	Metric/Measure
2.1.1 Finalize and implement the Quality Improvement (QI)/Performance Management (PM) plan	<ul style="list-style-type: none"> <li>QI/PM plan finalized by September 2024</li> </ul>
2.1.2 Train CCPHD staff on QI	<ul style="list-style-type: none"> <li>75% of staff trained on QI by December 2025</li> </ul>
2.1.3 Complete a minimum of two agency QI projects	<ul style="list-style-type: none"> <li>A minimum of two QI projects completed annually beginning June 2025</li> </ul>
2.1.4 Identify QI projects through Strategic Plan	<ul style="list-style-type: none"> <li>A minimum of two QI projects will be identified via the Strategic Plan beginning June 2025</li> <li>PDSA completed annually beginning December 2024</li> </ul>
<b>Objective 2.2: Implement a performance management system.</b>	
Strategies	Metric/Measure
2.2.1 Finalize MiCalhoun.org (CCPHD PM system)	<ul style="list-style-type: none"> <li>MiCalhoun.org structure and process finalized by September 2024</li> <li>Quarterly progress reports provided by leadership to all CCPHD staff and at Board of Health monthly meetings beginning December 2024</li> </ul>
2.2.2 Orient staff on PM	<ul style="list-style-type: none"> <li>Built into CCPHD staff orientation to be completed in September 2024</li> <li>All CCPHD staff will receive PM orientation as confirmed in staff training log</li> </ul>
<b>Objective 2.3: Develop a standardized policy and procedure annual review process.</b>	
Strategies	Metric/Measure
2.3.1 Establish a multi-level staff committee to develop a policy and procedure review process <ul style="list-style-type: none"> <li>Timeframes for administrative feedback</li> <li>Meeting schedule to review policies</li> <li>Location where policies are accessed</li> <li>Methodology for receiving frontline staff input</li> <li>Build and implement workflow process via SharePoint</li> </ul> Create schedule of policies and procedures to be reviewed	<ul style="list-style-type: none"> <li>Policy and procedure committee established by December 2024</li> <li>Official process created and published by July 2025</li> </ul>

2.3.2 Build and implement workflow process via SharePoint	<ul style="list-style-type: none"> <li>▪ Workflow process created by December 2024</li> <li>▪ Staff training on workflow process by March 2025</li> </ul>
2.3.3 Establish a policy and procedure review process for all CCPHD staff	<ul style="list-style-type: none"> <li>▪ Policy and procedure review process established by March 2025</li> </ul>
Objective 2.4: Develop a CCPHD Equipment and Technology Plan to increase staff efficiencies.	
Strategies	Metric/Measure
2.4.1 Establish and implement an equipment and technology plan that includes: <ul style="list-style-type: none"> <li>▪ Guides and workflow steps for software programs (e.g., Teams, Outlook)</li> <li>▪ Educational opportunities for hands-on training when new technology is introduced</li> <li>▪ Equipment obsolescence and replacement standards</li> <li>▪ Methodologies for increased staff efficiencies</li> <li>▪ Research and review current technology advances</li> </ul>	<ul style="list-style-type: none"> <li>▪ Equipment and technology plan created and implemented in collaboration with IT by December 2025</li> </ul>

Objective 2.5: Develop and publish a comprehensive Branding and Communication Plan.	
Strategies	Metric/Measure
2.5.1 Convene a multi-level staff committee to develop a comprehensive Branding and Communication plan that includes: <ul style="list-style-type: none"> <li>Detailed internal and external communication and branding strategies</li> </ul>	<ul style="list-style-type: none"> <li>Branding and communication committee convened by September 2024</li> <li>Branding and Communication Plan created and distributed by December 2024</li> </ul>
2.5.2 Build and release to all staff: <ul style="list-style-type: none"> <li>Templates for consistency in branding</li> <li>Social media platform processes</li> <li>Website review schedule</li> </ul>	<ul style="list-style-type: none"> <li>Templates released to all employees by March 2025</li> <li>Social media platform processes released to all employees by March 2025</li> <li>Website reviewed and logged according to schedule beginning March 2025</li> </ul>
2.5.3 Training CCPHD staff on templates	<ul style="list-style-type: none"> <li>Staff training on standard formats completed by June 2025</li> <li>Template and standard training during onboarding/orientation process will begin in June 2025</li> </ul>

<b>Strategic Direction 3: Planning</b>	
<b>Goal: Improve the health needs of our community.</b>	
<b>Objective 3.1: Identify and secure funding sources for current and potential new programming.</b>	
<b>Strategies</b>	<b>Metric/Measure</b>
3.1.1 Ensure current programs are achieving performance benchmarks to sustain and potentially increase funding	<ul style="list-style-type: none"> <li>▪ Program benchmarks established by March 2025</li> <li>▪ Monitor performance on a quarterly basis beginning September 2025</li> </ul>
3.1.2 Collaborate with community and non-profit organizations for funding and grant opportunities	<ul style="list-style-type: none"> <li>▪ A minimum of three community partner/non-profit collaborations identified annually beginning September 2024</li> </ul>
3.1.3 Obtain and sustain PHAB accreditation	<ul style="list-style-type: none"> <li>▪ PHAB accreditation achieved by December 2025</li> </ul>
3.1.5 Develop a five-year financial and programmatic forecast to perform staffing analyses	<ul style="list-style-type: none"> <li>▪ Five-year financial and programmatic forecast completed and updated annually beginning July 2024</li> </ul>
<b>Objective 3.2: Identify need and support for a community focused health and wellness facility.</b>	
<b>Strategies</b>	<b>Metric/Measure</b>
3.2.1 Establish interim space strategy to include identifying positions that need to be in office full-time, can utilize shared space, or need temporary office space	<ul style="list-style-type: none"> <li>▪ Interim space strategy developed and implemented by October 2024</li> </ul>
3.2.1 Develop and administer a partner and community survey to determine need and support for a community health and wellness facility	<ul style="list-style-type: none"> <li>▪ Survey developed and distributed by January 2025</li> </ul>
3.2.2 Conduct cost-based need analysis to determine whether to: <ul style="list-style-type: none"> <li>• Remodel current space</li> <li>• Rent new space</li> <li>• Buy new space</li> <li>• Build new space</li> <li>• Maintain current space</li> </ul>	<ul style="list-style-type: none"> <li>▪ Cost based need analysis conducted by June 2025</li> <li>▪ Decision made on whether to remodel, rent, buy, build, or maintain made by December 2025</li> </ul>

Objective 3.3: Serve as Calhoun County Chief Health Strategist	
Strategies	Metric/Measure
3.3.1 Continue building and enhancing collaborative partner relationships	<ul style="list-style-type: none"> <li>▪ Tracked number of new collaborations, events, or programs formed annually beginning December 2024</li> </ul>
3.3.2 Lead and support the three-year CHNA process	<ul style="list-style-type: none"> <li>▪ Assumed lead and complete the 2025-2027 CHNA process.</li> </ul>
3.3.3 Lead the CHIP implementation throughout the duration of the current cycle.	<ul style="list-style-type: none"> <li>▪ Measure/track how many meetings CCPHD partakes in while leading the CHIP</li> </ul>

