I. Process Overview

The strategic plan for the Erie County Department of Health (ECDH) needed to be updated for the 2016 – 2018 time period by the end of 2015. The process conducted to prepare the three year strategic plan was as follows:

a. March 2015 – May 2015: an internal and external readiness assessment was conducted. This assessment included one on one interviews with key management employees, focus groups with all other employees and one on one interviews with key external stakeholders. The results of the readiness assessment are included in section II of this document.

b. A presentation of the observations and recommendations from the readiness assessment was made to the entire ECDH staff at the May all staff meeting. A similar presentation was made to the Board of Health in July.

c. June 2015 – August 2015: An internal strategic planning team was formed with participants from all three main divisions and administration. This team helped define possible priorities, acted as the strategic planning champions for the rest of the organization and made recommendations on next steps.

d. August 2015: A list of five possible priorities were selected. A process of gathering input on those priorities was conducted including an internal survey and outreach to identified external stakeholder including the Board of Health. From this process, three overarching priorities were chosen for the 2016 – 2018 ECDH Strategic Plan. These priorities and associated process and outcome measures are listed in section III of this document.

e. The Divisions then developed divisional level priorities and work plans based on the three organizational Strategic Priorities. These work plans are listed in section IV of this document. The work plans were designed to be flexible depending on changing political conditions impacting strategic issues such as mandates from the State Department of Health, funding through the County Council, other political changes during the three year time period and status of the identified Strategic Plan measures at the end of each Plan year.

II. Readiness Assessment Observations and Recommendations

A. Introduction

The Erie County Department of Health is undertaking its strategic planning process for years 2016 – 2019. In this process, they are following NACHO guidelines in conducting a readiness assessment as a precursor to the formal planning process. From March of 2015 – June of 2015, internal and external stakeholders of the ECDH were interviewed through a formal interview assessment process and the results of that assessment process are provided here. In addition to the data collected in those
interviews, there are also certain observations and recommendations included in this report. It is expected that this readiness assessment material will be the foundation for the three year strategic plan and that the data included in this report will be used to develop the top priorities for the department over the next three years.

B. Observations
The assessment process was helpful in identifying themes in terms of the perception of the ECDH and the value they create for the Erie County community. Many of the answers were formed or impacted by the relationship of the person to the ECDH, with employees having a very specific perspective while external stakeholders saw the ECDH and their value through the lens of their experience with the Department. The goal was to find the commonalities between these widely ranging perspectives in order to determine the greatest level of perceived need in the Erie County community and to determine where the ECDH would best fulfill expectations of the community as they looked at their priorities for the next five years.

General observations from the assessment process are as follows:

1. There is a strong concern internally at the ECDH regarding pay levels, training opportunities and long term sustainability of the knowledge base currently on staff. This concern was not perceived externally except for a few stakeholders with close connections to the ECDH.
2. The external stakeholders saw a great opportunity for the ECDH to play a neutral convening role in the development of collaborative activities to improve health outcomes in Erie County. Depending on the stakeholder, this included involvement of the ECDH in water quality issues, economic development/tourism activities, involvement in task forces addressing social determinants, and specifically as a convener between hospitals and providers. This niche as a role into the future for the ECDH was not recognized internally.
3. There is a recognition internally and externally that the majority of the population of Erie County does not understand the role that the Health Department plays in their lives. The idea that the Health Department does not market its value effectively to the greater population was repeated by many of the stakeholders interviewed.
4. The item above was very apparent in the fact that the one role of the Health Department that the most people identified as how people perceive the Department was through the food inspections, and this because the food inspections are published in the Erie paper.
5. There are a number of areas of need within Erie County that could be addressed in the strategic plan. One of the key elements of the planning process will be to determine the best alignment of need and feasibility in terms of Departmental resources to fill that need now, or through some kind of strategic activity to fund and/or develop internal Departmental resources to fill that need.
6. One of the biggest concerns internally was also identified by external stakeholders who are aware of governmental changes; the need for finding funding sources that are sustainable in the changing political climate in Pennsylvania.
7. Overall, the perception of the value of the ECDH now and potentially into the future is very positive, especially across the wide range of external community stakeholders. This was especially interesting to see in the responses from rural communities, who for the most part were not completely aware of what the ECDH does, but who felt that their impact is, or could be positive on their community.
C. Recommendations
In developing the recommendations below, the data collected was taken into consideration, and also the tone of the interviews, especially with external stakeholders. All responses were written in real time as they replied to the questions, but the emotional content of those answers is being interpreted in terms of belief in what the ECDH is capable of in terms of support for a healthier Erie County.

The recommendations from the perspective of the assessment interviews are as follows:

1. Funding: This was the biggest concern/challenge articulated both internally and externally by stakeholders associated with or familiar at all with the ECDH. It is recommended that revenue and funding be one of the priorities of the three year strategic plan. State and local government stakeholders pointed out that funding for entities such as Health Departments will only stay static or be reduced. The idea of only offering programming that is grant funded and thus limits the range of activities and/or level of outreach is also a concern of stakeholders so looking at how to make funding more universal should also be considered when looking at this as a priority.

Some of the ways other Health Departments have addressed this challenge is through looking at more community based solutions to revenue, such as partnering with community based organizations for grants that can be collectively designed and delivered or offering universal support as a Health Department to a more widespread community effort for a portion of the funding for that effort in order to augment Department operational costs without limiting the activities associated with that funding. Another possible revenue stream that is being pursued by Health Departments is to charge for services. This is discussed in more detail below, but it is worth considering what actions the ECDH would need to take to position themselves for a sustainable revenue stream from charging for services.

Grants were discussed internally and externally as a possible means of improving long term sustainability of funding. This form of revenue is certainly valid, though grants are becoming more difficult to obtain, and the percentage of administrative fees associated with grants is being reduced. When looking at grants though, it is recommended that this be explored, especially grants that can be done collectively with other community organizations, grants that are based on improved community outcomes rather than specific populations, and grants that align with the Community Health Improvement Plan in terms of focusing on the social determinants of health such as addressing obesity through healthier food options and education around food choices.

2. Marketing/Education: This was identified as a strength and a great concern to stakeholders interviewed. The greatest concern was that the ECDH is not understood by the majority of the population it serves, and that this will not help if they want to look at alternative ways to fund activities into the future. It was felt that the ECDH does great things for the Erie County community, but that it is only the populations who receive direct support through programming who really understand the breadth and effectiveness of the work that the ECDH does.

Likewise, the educational component of the ECDH is considered very effective, but there are concerns that the work that the ECDH does in this arena is duplicating work done by others, and
that there is more potential for education around health literacy and other health related topics that the ECDH could be engaged in.

Looking at how to combine these two strengths/concerns could be a priority for the ECDH in the next strategic plan. It is being recommended that ways to use education to also raise the awareness of the ECDH and the work that they do could be a double benefit. This could take to the form of finding funding for education that is more universal and reaches parts of the population not currently served, such as school age children across all of Erie County, or partnering with Senior Services in some kind of funded activity in which the participants in different senior programs also receive health education and thus become more aware of the ECDH and the role they play.

Bottom line, the more the already strong, in place educational outreach activities of the ECDH can be used to educate on health topics and also create greater awareness of the ECDH, the more likely that politically the ECDH will be seen in a good light by the County Council and other political entities that may be involved in future funding decisions for the department.

3. Environmental: This is the most widespread and understood Division within the ECDH. As tourism grows in importance within the economic coalitions and initiatives in Erie County, the ECDH needs to be at the table as a partner and be seen as the “go to” organization for environmental support of those tourism activities. This is already the case for the most part, it is being recommended that the excellent reputation of the ECDH in this arena be leveraged as more economic development activity and funding goes towards tourism.

This could take the form of a priority in the strategic plan, or within the Environmental Division work plan under potential new sources of funding/revenue. Activities may include more active participation in economic development activities on the part of Environmental Division management, active collaboration with tourism oriented organizations, especially non-profit organizations who could collaborate on grant funds, or more active education and advocacy for the ECDH to have a strong role in the economic development of the Erie County community through their environmental activities.

4. Nursing/Provider interaction/hospital: This is listed under recommendations because of the fact that providers and hospitals mentioned areas where the ECDH provides programming and services through their Nursing Division that are necessary and effective, and that there is a concern that some of these programs and services are grant driven and funding may become a concern. It is recommended that within any sort of Funding/Revenue priority, the services provided within the Nursing Division be evaluated to possibly become billable.

The changes to Medicaid were mentioned several times, and with the potential for the funding for Medicaid services changing, this might position the ECDH to take advantage of their services for the uninsured and underinsured population. It is recommended that the ECDH continue to explore
what actions will need to be taken to be in a position to bill for services, and that they actively explore how initiatives such as DSRIP (Delivery System Redesign Incentive Programs) will work in Pennsylvania and assure that they are part of the value creation stream for services to the Medicaid, underinsured and uninsured populations.

5. Programming: This area should be evaluated as it pertains to the three year strategic plan very closely as to the role it will play in the three to five year time period. Currently, the programming that the ECDH does is seen in a very positive light, it is considered an area of expertise within the ECDH, it is specifically grant funded so cannot be expanded to other populations not covered under the grants, and is also seen as something that anyone who does not receive benefits from the programming is generally not familiar with what programming the ECDH does and for who.

The big decision will be whether programming will be seen as a stand-alone priority, or within another priority such as Funding/Revenue Streams. It is being recommended that the idea of programming be included in other priorities and then broken out by the specific Divisions in terms of the programming they want to continue and possibly new programming they would like to pursue over the strategic planning period. Partially, this recommendation is tied to the wide range of answers received from the readiness assessment in terms of what programming will serve the community in the three to five year time period. And within those options, many of the external answers focused on educational programming to address issues such as drug addiction, obesity and tobacco, not specifically service delivery programming such as the TB clinics that are currently in place. Once again, this could be because of the lack of knowledge by the greater community that the ECDH even provides services within their programming activities.

6. Community convener role: This was seen as a key role for the ECDH in discussions with a number of external stakeholders. The ECDH has a good reputation as a neutral entity at the table already for various task forces and initiatives, and they are being encouraged to increase their visibility in this role as a neutral convener. This could take several forms. One is in support of the Community Service Plan activities of the hospitals in the area in which the ECDH pulls the hospitals together to review their CSPs and discuss alignment with the ECDH Community Health Improvement Plans. This could be a politically important role for the ECDH, and could create greater cooperation and less duplication of services between the hospitals and the ECDH. As this role is being advocated by the hospitals, the next step would be to make it a priority in the strategic plan, or as part of the education/marketing goal or the funding/revenue goal for the Administrative Division of the ECDH.

The national movement is for local Health Departments to become more of the convener of discussions and collaborative activities to improve health outcomes through a focus on the social determinants of health. There is a great deal of community led activity to address different social concerns in the Erie County community already in place, the ECDH has an opportunity to become the backbone organization (Stanford University Collective Impact model terminology) in support of these activities and to look for funding as the backbone organization either from local funders or through more nationally based grants.
The Erie County community is faced with common issues such as growing poverty and drug and alcohol abuse issues, and with some unique challenges such as the high rate of refugee resettlement in the area that may open up opportunities for the ECDH to take a convener/backbone role and be eligible for funding either locally or nationally.

7. Rural outreach: There was an initial concern stated before the readiness assessment as to the level of understanding of the ECDH in the rural communities of Erie County, and a desire to learn more about what needs the rural communities have. The readiness assessment included conversations with representatives of Corry, Albion, Union City and Northeast, and with several townships representing more of the suburban population. The perception that the rural communities do not have an understanding of what the ECDH does is correct. Except for environmental, especially sewage and water inspections, there is very little knowledge of the ECDH.

When asked what kinds of services they would need, the two main responses, along with continuation of environmental activities, were education and transportation. There was a specific request that the ECDH do more to help educate the rural populations around healthy living choices such as tobacco, healthy food and chronic diseases. Several rural community members even requested that if the ECDH would get them information, they would find a way to distribute it to their population base.

The transportation issue is more complex. All of the rural representatives interviewed mentioned the isolation of rural communities, along with the lack of good medical services in Erie County outside of Erie. They see their population, especially the rural poor, having huge medical issues because of their lack of transportation into Erie to take advantage of the medical services there. In terms of the ECDH role in this, it is recommended that the ECDH take this into consideration within their Divisional priority selections, especially as it pertains to programming and education, but that transportation is a bigger community wide challenge that would not be a good fit specifically for the ECDH.
D. Data From Assessment

1. Methodology Overview
   Readiness Assessment Development Process
   • Developed internal and external questionnaire
   • Conducted internal interviews and focus groups
   • Conducted external interviews
   • Approximately 90% of internal Health Department employees interviewed
   • 35 external interviews conducted

2. What does the Erie County DOH do well?

3. What does the Erie County DOH do well?
4. What does the ECDH do well?  
Combined Answers

![Combined - Do Really Well](image)

5. What does the DOH do that serves the Erie County Community really well?  
Internal Answers

![Internal - Serve Community](image)
6. What does the DOH do that serves the Erie County Community really well?

External Answers

![External - Serve Community Chart]

- Deliver programs that serve the community
- Bring the community together - CHA, CHIP Communications
- Partners with other community organizations
- Protects the community - public health information
- Food inspections
- Education

7. How does the DOH serve the community well?

Combined Answers

![Combined - Serve Community Well Chart]

- Protect Community Health - Public health information
- Deliver programs that serve the community
- Education
- Food Inspections
- STD/TB Clinics
- Brings the community together - CHA, CHIP, communications
8. What needs does the community have?
   Internal Answers

   ![Internal - Community Needs Chart]

9. What needs does the community have?
   External Answers

   ![External - Community Needs Chart]
10. What needs does the community have
   Combined answer

Combined - Community Needs

- Poverty
- Environmental safety
- Education on public health
- Medical care for underinsured
- HD needs to be leader/convener
- Drug and alcohol abuse
- Obesity, smoking, unhealthy behaviors
- Violence
- Lack of knowledge of HD services
- Funding
- Transportation
- Mental/behavioral health

11. What community needs is the DOH meeting well?
   External Answer

Meeting Community Needs well - External

- Environmental Needs
- Education on public health issues
- STD/TB clinics and other medical issues
- CHA/CHIP information and dissemination
- Immunizations
12. What community needs is the DOH not meeting well?  
   External Answers

   ![External - Not Meeting Community Needs Graph]

   - Knowledge/Education about chronic disease
   - Convener for community initiatives/hospitals
   - Built environment
   - Food issues
   - Lack of funding for services
   - Rural Poverty/health

13. What programming should be considered  
   Combined Answers

   ![Combined - Programming Needs Graph]

   - Drug Awareness/Prevention
   - Water quality and safety
   - Aquatic Biologist
   - Obesity and food issues
   - Common complaints: ticks, mold etc.
   - Mental health counseling
   - Lead poisoning
   - Public health speakers/Outreach
   - STD Outreach and education
   - Convening
   - Violence
   - Tobacco
14. What partnerships should be fostered?
   External Answers

![Partnerships Needed Graph]

15. What is the perception of the DOH?
   Combined Answers

![Combined - Perceptions Graph]
16. What external factors need to be considered in strategic plan?
Internal Answers

17. What external factors need to be considered in strategic plan?
External Answers
18. What external factors need to be considered in the strategic plan?

Combined Answers

Combined - External Factors to Consider

- Funding
- Regulations/insurance changes/ACA
- Staff retention and attrition/ competitive pay
- Community needs/poverty
- Community collaborations
- Behavioral health

19. What internal factors need to be considered in strategic planning process?

Internal Answers

Internal - Internal Factors to Consider

- Staffing stability/pay issues/training
- Funding
- Staff involvement and investment
- Good communication process
20. Organizational Needs
   Internal Answers

21. Perceived barriers to good strategic planning?
   Internal Answers
22. How can perceived barriers be overcome?  
Internal Answers

Overcoming Perceived Barriers

- More awareness of what we do
- Communication updates: emails and staff meetings
- Staff gets to be heard/have opinions

23. What else needs to be in place to help support strategic planning process?  
Internal Answers

How to Overcome Perceived Barriers to Strategic Planning Process

- Funding
- More Staff involvement
- Community involvement
- Support for staff/organized process with defined goals
- Breakdown of silos/improved communication between Divisions
III. Strategic Planning Priorities and Measures

Priority #1

Assure consistency, strength and retention of the knowledge base and staffing levels to support fulfillment of the ECDH mission

Measures

- Median years of service
- Number of hours training per person
- Quartiles by years of service
- Track the number of full-time clerical, technical, professional, and management positions as well as both bargaining and non-bargaining positions at ECDH for 2016, 2017, and 2018 using 2015 as the base year and January 1 as the point-in-time tally date.

Priority #2

Provide long term sustainability of the ECDH through programming, fees for service, grants, other leveraged revenue streams and strengthened community level collaborations

Measures

- Increase the percentage of non-county dollars as a percentage of the overall budget using 2016 as the base year
- Increase the amount of fees collected annually by 5% (TBD) using 2016 as the base year and increasing for 2017 and 2018
- Track the number of funding opportunities in which we participated and applied
- Track missed funding opportunities and the reason they were missed

Priority #3

To create greater understanding of the value of the Erie County Health Department to the Erie County Community through raised awareness of programs and services and enhanced community level collaborations

Measures

- Count the number of webpage and Facebook hits and the number of tweets during the times of the Time Warner messages
- Measure the monthly counts of the number of mentions in any media outlet using Google search for ECDH, Erie County Department of Health and iterations of these names
- Increase the number of community collaborations/partnerships annually by 5% using 2016 as the base year and increasing for 2017 and 2018

*Note: Each department will decide what type of collaborations fit their needs and there will be “collaborations” tab in Time and Travel as part of the PR log. It is expected that each staff member will record all new community collaborations/partnerships including the name of the person, the organization and the purpose of the collaboration.
IV. Next Steps for ECDH

A good strategic plan should be a living breathing document that is reviewed regularly and updated when required to account for changing internal and external conditions. The strategic plan should be a roadmap for activities and actions, and the measures reviewed regularly for effectiveness of proposed activities and actions developed in the work plans. The recommendations for next steps to keep the strategic plan for ECDH valid and relevant are as follows:

1. An overview of the strategic plan will be presented to the full staff in December at the monthly staff meeting and updates will be presented on a quarterly basis to the staff at the monthly staff meetings.
2. The Division Directors and Supervisors will be reviewing the work plans on a regular basis with their staff, and will be focusing on specific items within the work plans on a monthly basis.
3. Each division will be responsible for tracking their measures as they are due, and the Directors and Supervisors Team will review progress on all measures annually.
4. The Strategic Planning Team will meet twice in 2016 to review progress, discuss relevance of the priorities, work plans and actions and to make any recommendations for changes that might be needed to the plan.
5. An update will be provided to the Board of Health on an annual basis, specifically a review of the measures for each priority.