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Frederick County Health Department

2013-2018 Strategic Plan

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Introduction and Process Summary

The following pages include a brief introduction to the process used to develop the strategic plan, including information related to meetings and planning sessions.



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Introduction

In May 2013 the Frederick County Health Department began a process to develop a strategic plan to guide the organization during the next five years. To ensure the process resulted in a comprehensive plan it incorporated the evaluation of national and state trends expected to impact the provision of public health services, an analysis of the local dynamics and health needs of Frederick County, and an assessment of FCHD's own capabilities and vulnerabilities as it relates to its ability to fulfill its mission.

These assessments were completed and reviewed during the course of a five month timeline that included multiple meetings and culminated with completion of the FCHD 2014-2019 Strategic Plan in September 2013. The pages that follow summarize the major points of the process and associated information.



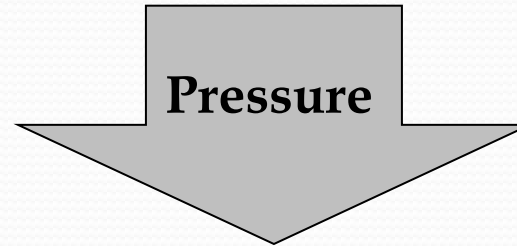
Process Summary: Timeline

- Meeting: Developing the Process – June 10, 2013
- Meeting: Retreat Preparation – June 20, 2013
- Retreat Day 1: Strategic Context – June 24, 2013
 - Progress Against Previous Plan Discussion, Forces of Change Assessment, Strengths, Weaknesses, and Priorities
- Retreat Day 2: Strategy Development – June 25, 2013
 - Strategic Vision, Priority Strategies, and Goals & Objectives
- Report Development – July - September 2013
- Meeting: Finalizing the Report - Pending

Process Summary: Key Components



External/National Factors



Local/Frederick County Health



Internal/FCHD Activities



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Process Summary: Key Information Sources/Drivers

Information/Assessment

Drives



- Health reform
- Changing demographics
- Funding
- 10 Essential Public Health Functions
- Maryland State Health Improvement Process
- Community Health Needs Assessment
- Local Health Improvement Plan
- Quality Improvement Plan
- Employee Satisfaction Survey

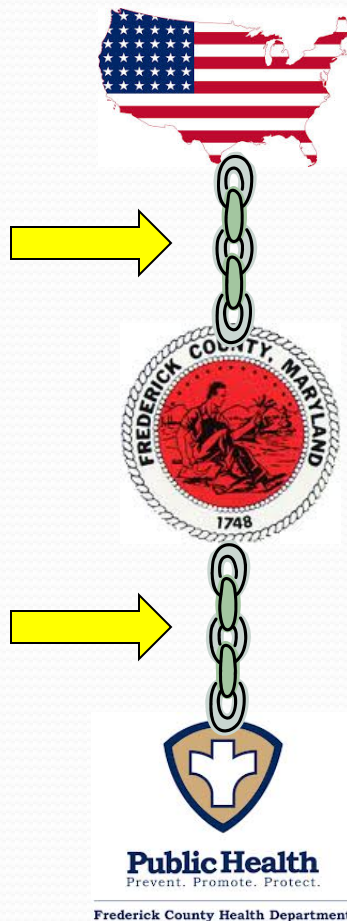
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Process Summary: Identifying “Linkages”



- Health reform
- Changing demographics
- Funding
- 10 Essential Public Health Functions
- Maryland State Health Improvement Process
- Community Health Needs Assessment
- Local Health Improvement Plan
- Quality Improvement Plan
- Employee Satisfaction Survey

Process Summary: Strategic Planning Framework

Phase I

Establish Strategic
Context

- Strategic Environment
- Validate Core Issues

Phase II

Identify Strategic
Direction

- Vision
- Goals & Objectives

Phase III

Determine Initiatives
& Priorities

- Strategies
- Strategic Actions



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National and State Considerations

During the planning process FCHD analyzed and discussed a number of different national trends anticipated to impact the provision of public health services in the coming years. Similar discussions and analysis occurred relative to the state of public health in Maryland specifically. The following pages include a summary of the implications of these national and state-wide trends on FCHD.



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National Factors: Implications for FCHD

Most impactful for FCHD:

- Prevention will become more of a priority as the associated return on investment becomes more tangible and prevention receives greater emphasis as a cost-saving measure
- Federal grant funding for public health programs expected to decrease
- Expansion of mental health and substance abuse insurance coverage due to ACA likely to increase demand for those services

Additional implications:

- Continued health care cost/spending growth is not sustainable... care must be “shifted” to lower cost settings



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National Factors: Implications for FCHD (cont.)

Additional implications (cont.):

- Increased coordination (and some consolidation) within the community and across providers is a must to achieve cost savings and improve care delivery
- Increased patient accountability/participation is essential... but limited incentives and/or penalties likely present in the short-term to encourage those actions from the patient's perspective
- The expansion of insurance access will impact how/where currently uninsured access care in the future



National Factors: Impact on 10 Essential Public Health Services

Any major public health activity should be able to fit into at least one of these 10 essential services:

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.

 Represents those activities anticipated to increase in importance given health industry changes and other national factors



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National Factors: Impact on 10 Essential Public Health Services

6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

 Represents those activities anticipated to increase in importance given health industry changes and other national factors



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State Considerations: Implications for FCHD

- Health reform is expected to change the “role” of LHDs in Maryland...
- In many instances the role of LHDs will likely increase in importance post-ACA...due to greater focus on health vs. sick care.
- Near-term the volume of direct care services is likely to be impacted given increased insurance coverage/access...
- Increasing the importance of “collections” and third-party contracting.
- Increased importance expected to be placed on collaboration and coordination both within LHDs as well as with other governmental and non-governmental organizations.



Local Health Needs

To ensure its strategic priorities were in alignment with the needs of its community, FCHD reviewed a number of health statistics and assessments related to Frederick County. The following pages summarize some of that information and where priority community needs seem to be greatest.

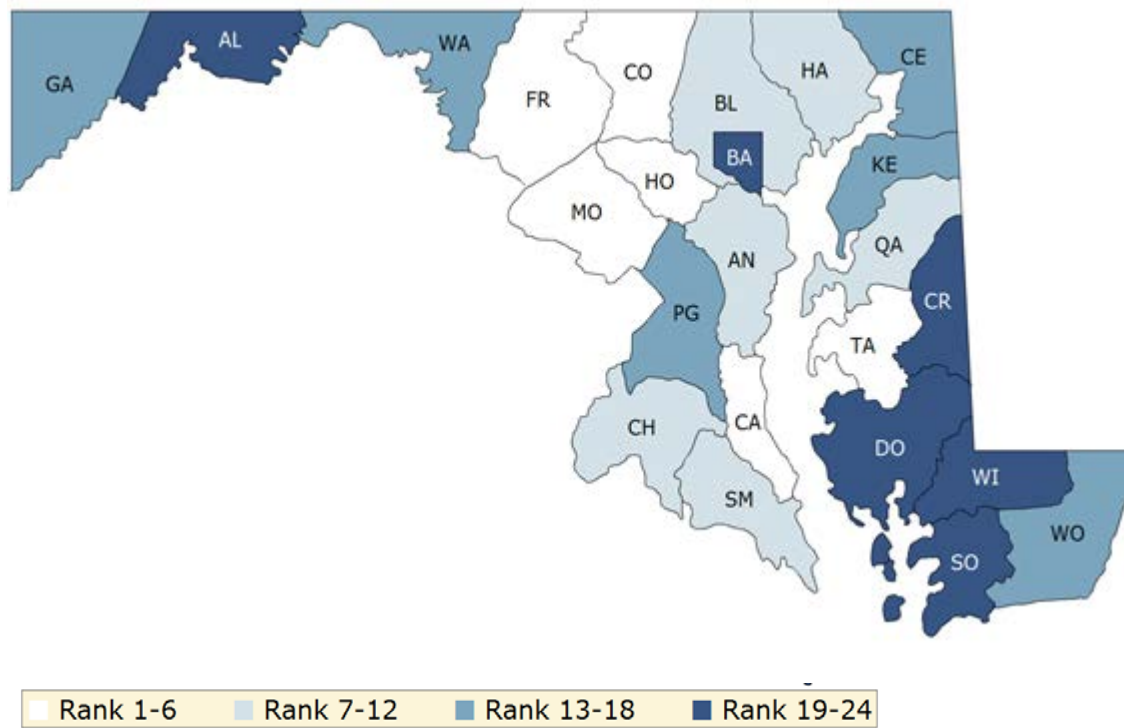


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2013 Health Rankings: Health Factors

Frederick Ranked 3rd For Health Factors

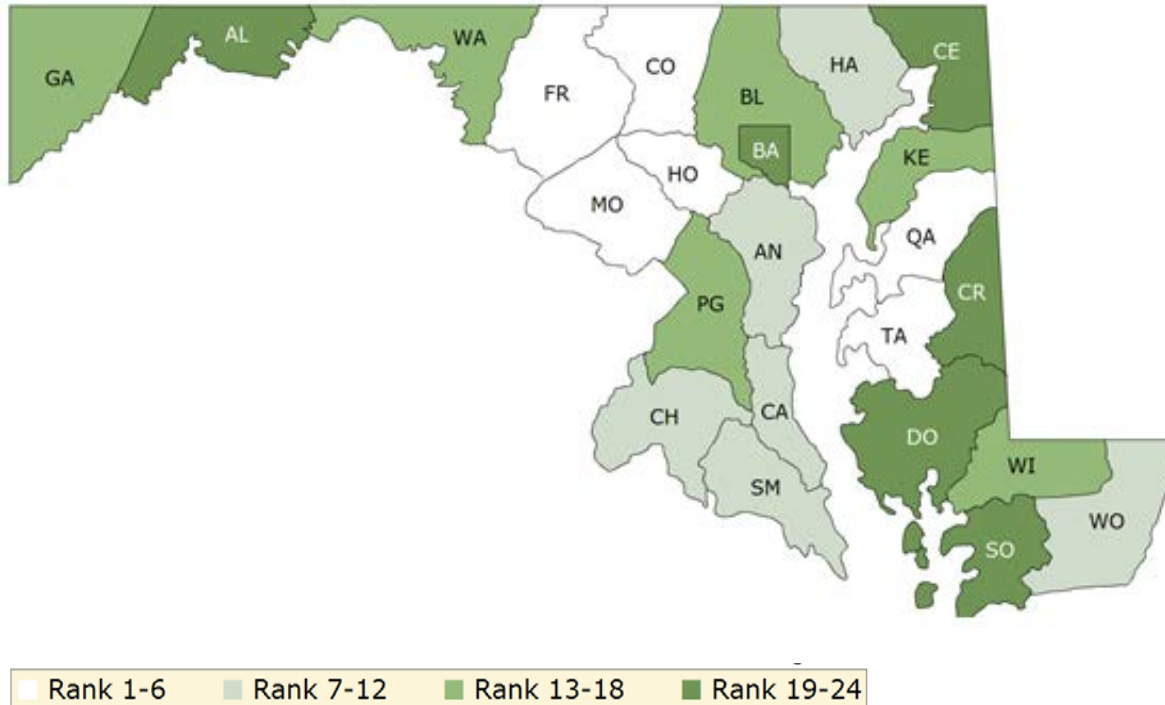


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2013 Health Rankings: Health Outcomes

Frederick Ranked 3rd Healthiest County in Maryland



Demographic Profile: Growth and Age Distribution

Frederick County

Maryland

Age Group
<15
15-44
45-64
65+

2013 Est.	2018 Est.	CAGR
48,156	48,046	0.0%
92,656	93,495	0.2%
70,551	74,482	1.1%
29,310	36,167	4.3%

2013 Est.	2018 Est.	CAGR
1,116,364	1,136,939	0.4%
2,347,074	2,338,827	-0.1%
1,643,568	1,678,891	0.4%
784,296	937,870	3.6%

Total

240,673	252,190	0.9%
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5,891,302	6,092,527	0.7%
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Median Age

38.7	39.8
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38.3	39.3
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% Below Poverty (2011)*

5.4%

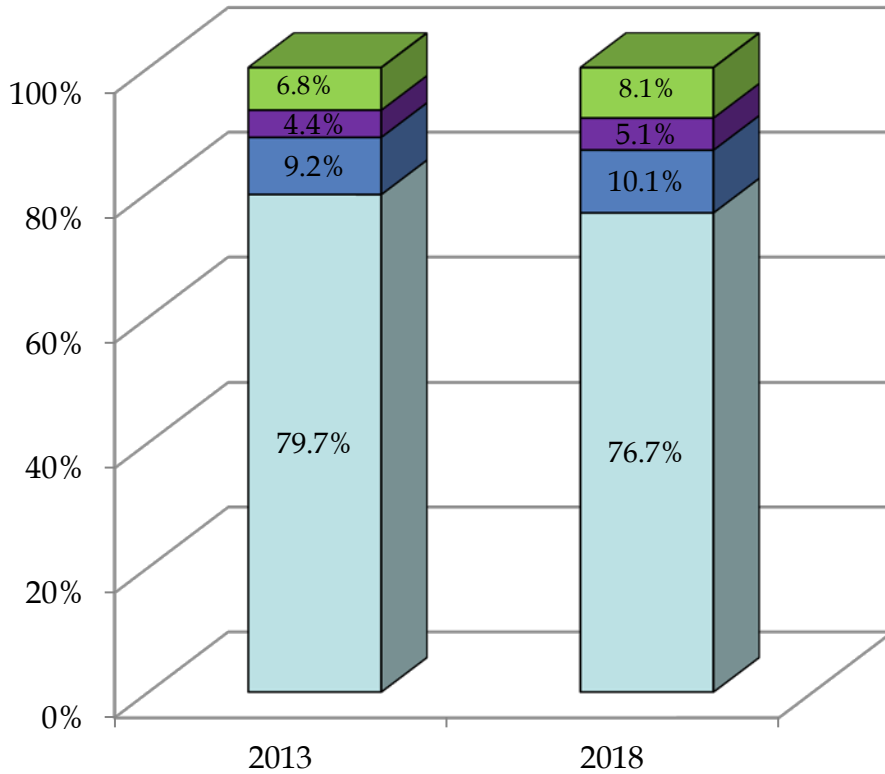
9.0%

Source: Claritas & American Community Survey (US Census Bureau)

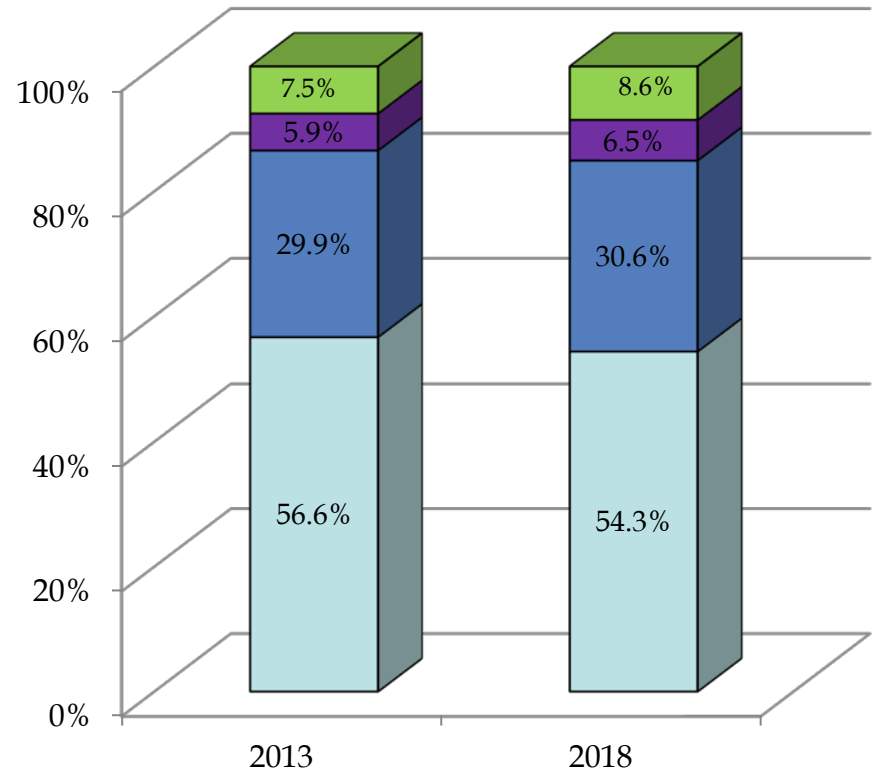
*American Community Survey 5-Year Estimate (2007-2011)

Demographic Profile: Race

Frederick County



Maryland

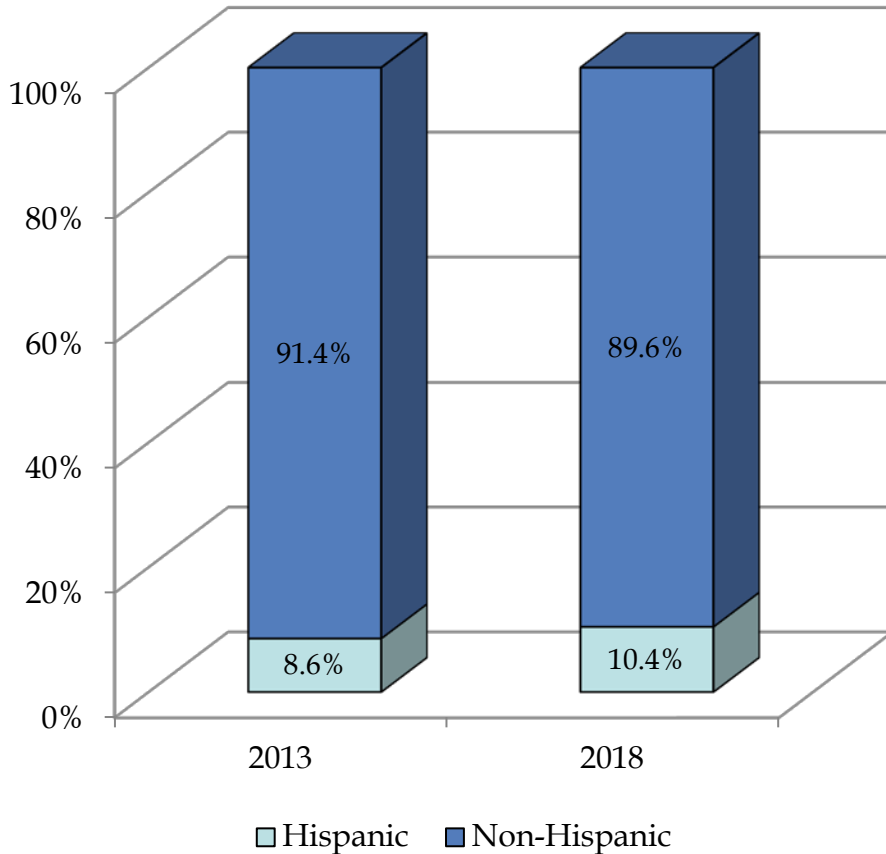


White African American Asian All Other

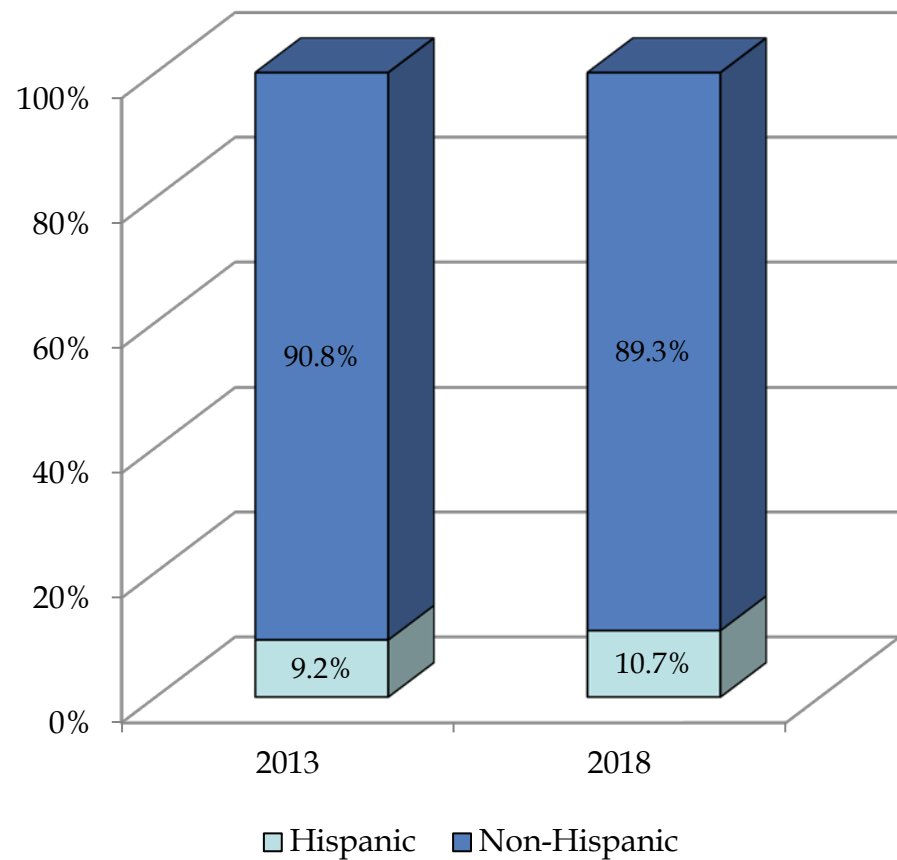
White African American Asian All Other

Demographic Profile: Ethnicity

Frederick County



Maryland



Maryland State Health Improvement Process (SHIP): Summary Results

Based on the 2012 SHIP report, the following areas include those where Frederick County trailed the Maryland SHIP 2014 target:

SHIP Objective	Measure Description	Frederick '12 Report	Maryland Target 2014	% Difference
Increase life expectancy	Life expectancy at birth	80.2	82.5	(2.8%)
Reduce child maltreatment	Rate of indicated non-fatal child maltreatment cases	5.9	4.9	20.4%
Reduce the suicide rate	Rate of suicides per 100k population	12.0	9.1	31.9%
Reduce Salmonella infections transmitted through food	Rate of Salmonella per 100k population	18.6	12.7	46.5%
Reduce deaths from heart disease	Rate of heart disease deaths per 100k pop.	176.2	173.4	1.6%
Increase proportion of adolescents who have annual wellness checkup	%'age of adolescents enrolled in Medicaid that received wellness visit	51.3%	54.1%	(5.2%)

Frederick County Community Health Assessment: Summary Results

The following health priorities were recommended based on findings from the most recently completed Community Health Assessment:

Access to Healthcare Services:

- Specifically routine care, availability (office hours), and health disparities (low-income and minorities)

Death, Disease, and Disability

- Specifically related to heart disease & stroke, cancer, and respiratory disease

Maternal, Infant, and Child Health

- Specifically prenatal care



Frederick County Community Health Assessment: Summary Results (cont.)

Mental and Emotional Health

- Specifically related to Alzheimer's disease ADD/ADHD, and emotional wellness (stress and suicide)

Modifiable Health Risks

- Specifically related to overweight & obesity, alcohol abuse, and tobacco use



Frederick County Local Health Improvement Plan: Summary Results

The following were identified as the high-level “Priorities for Action” based on findings from the most recently completed Local Health Improvement Plan:

- Mental Health
- Affordable Dental Care
- Wellness and Prevention (specific references to obesity and tobacco usage)
- Access to Care
- Early Childhood Growth and Development















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Frederick County Health: Summary of Priorities and “Linkages”

Of the over 100 areas analyzed across the various assessments, the following were identified as recurring themes/priorities based on the research and analysis:

Priority Area	Identified as a Priority By:		
	SHIP	CHA	LHIP
Wellness & Prevention			
Child Health			
Mental Health			
Access to Care			
Heart Disease			

FCHD's Internal Situation

In addition to external considerations FCHD also analyzed its internal performance, capabilities, and needs. This process included a review of its

Quality Improvement Plan and an online survey of its staff to better understand its key strengths and priority areas for improvement based on staff perspectives. Key support functions (IT, workforce development, and communication) were also discussed during the retreat relative to FCHD's efficiency/effectiveness and associated implications on its financial stability.

A summary of these findings is included in the following pages.












FCHD Quality Improvement Plan

Purpose: To provide the context and framework for quality improvement (QI) activities within FCHD.

QI initiatives must support FCHD's mission and vision. FCHD-wide QI initiatives are considered taking into account the following criteria:

- Tie to 10 Essential Public Health Services
- Alignment with Strategic Plan
- Alignment with Local Health Improvement Plan
- Consistency with addressing need identified in CHA
- Ability to reach across divisions
- Potential for significant impact in optimal use of resources, improving efficiency and/or effectiveness of service

Strategic Planning Staff Survey: Respondents

		Response Percent	Response Count
Administration		5.2%	9
Behavioral Health Services		17.4%	30
Community Health Services		15.7%	27
Developmental Center		19.8%	34
Environmental Health		6.4%	11
Health Care Connections		2.3%	4
Public Health Preparedness		1.7%	3
School Health		25.6%	44
Scott Key Center		5.8%	10
answered question			172

Strategic Planning Staff Survey: Top Strengths of FCHD

FCHD Attribute	# of Top 3 Votes	# of 1 st Place Votes
Staff: Helpfulness and friendliness	68	24
Knowledgeable staff	63	25
Staff: Knowledge and skill	58	21
Good community connection and awareness	55	23
Ability to work together/as a team	50	19
Strong mission, all are welcome	44	18
Quality improvement efforts	40	7
Leadership	35	11
Level of current service quality	35	10
Collaboration with other county organizations	31	6
Forward thinking organization	26	5
Good internal communication	11	3

Strategic Planning Staff Survey: Top Areas for Improvement

FCHD Attribute	# of Top 3 Votes	# of 1 st Place Votes
Employee recognition	99	42
Interaction and coordination between FCHD divisions/programs	95	37
Internal communication	77	20
Productivity levels given amount of paperwork, etc.	57	19
Forward thinking	53	17
Interaction and coordination with other county organizations	46	11
Leadership	40	19
Staff: Knowledge and skill	21	2
Level of current service quality	14	4
Staff: Helpfulness and friendliness	14	1

Strategic Planning Staff Survey: County's Top Community Health Needs

Health Need	# of Top 3 Votes	# of 1 st Place Votes
Access to care	115	59
Wellness and prevention	111	25
Mental health	107	40
Child health	88	22
Heart disease	20	1



Key Process Outcomes: S.W.O.T. Analysis and Strategic Position

All information compiled to this point in the process was summarized into an assessment of FCHD's strengths, weaknesses, opportunities, and threats.

Input was also incorporated based on a Forces of Change exercise that attendees of the two day planning session completed. Information from the S.W.O.T. was then leveraged to establish FCHD's current strategic position, as the foundation for strategy development.



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FCHD Key Strengths and Weaknesses

FCHD Strengths

- Staff: Knowledge and skill levels
- Connectivity with the community
- Mission and staff's strong understanding of FCHD's purpose
- Quality/QI processes
- Administrative infrastructure, including EHR

FCHD Weaknesses

- Lack of coordination between divisions
- Internal communication
- Level/Amount of employee recognition



External Opportunities and Threats

Opportunities

- Stable population and growing diversity in the community
- Reform: Prevention focus; more insured
- Evidenced-based medicine and practices
- Increased connectivity and EHR utilization
- Use of telemedicine/care

Threats

- Reform: Unknowns; service delivery changes
- Funding instability
- Physician and other provider shortages
- Political instability



FCHD Strategic Position Based on S.W.O.T.

FCHD Strengths:

- Staff: knowledge, skill
- Community connectivity
- Mission
- Quality/QI
- Administrative infrastructure, including EHR

FCHD Weaknesses:

- Coordination between divisions
- Internal communication
- Employee recognition



External Opportunities:

- Stable population; growing diversity
- Reform: prevention focus; more insured
- Evidence-based medicine/practices
- EHR/Connectivity
- Telemedicine/care

External Threats:

- Reform: unknown; service delivery
- Funding instability
- Provider shortage
- Political instability



Key Process Outcomes: FCHD Strategic Vision

Based on its mission, vision, and current strategic position, FCHD's strategic vision was developed to more clearly articulate its desired future strategic direction.



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Linking Mission and Vision to Strategy

The organizational mission concisely articulates FCHD's long-term *purpose*...leveraging the vision to describe what FCHD will be as it is fulfilling that *purpose*.

The strategic vision must complement the organizational mission and vision while more specifically defining FCHD's strategic direction during the next three to five years.



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Mission and Vision

Mission (Purpose)

The mission of the Frederick County Health Department is to improve the health and well being of the residents of Frederick County through programs that prevent disease and illness, promote wellness and safety, and protect public health.

Vision (What we will be)

Frederick County leads as a community of health and wellness.

Strategic Vision

More specifically defines 3-5 year strategic direction to support mission and vision given the current situation.



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FCHD's Strategic Vision

FCHD is an innovative leader in transforming the public health system and forging community partnerships to facilitate efficient and effective access to services for all residents.



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Key Process Outcomes: FCHD Priority Strategies

This portion of the report defines FCHD's priority strategies and associated rationale.



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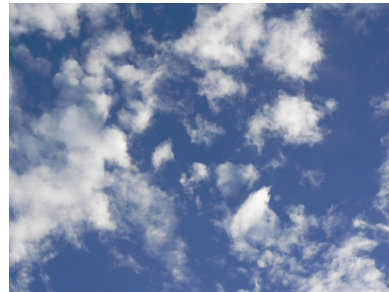
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Components to Achieve Strategic Vision



Strategic Vision

Where we want to be

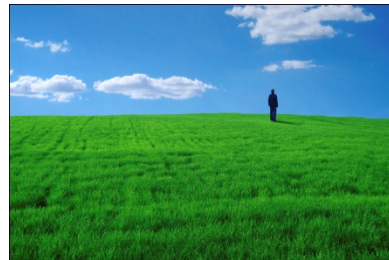


Strategies

Major initiatives to lead organization toward strategic vision

Goals/Objectives

Tactics and metrics required to support strategies



Action Steps

What needs to be done by when and whom to reach objectives



FCHD Priority Strategy: Transform the Public Health System

Serve as a catalyst for change by proactively pursuing activities to position FCHD as a forward-thinking leader in the provision of public health services.

Rationale:

- Positions for reform's focus on prevention/wellness and increase in insured population
- Advances existing evidence-based practices
- Capitalizes on EHR capabilities
- Bolsters against funding instability



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FCHD Priority Strategy: Forge Community Collaboration

Improve linkage to community members and health providers by leveraging people and technology to enhance outreach efforts.

Rationale:

- Responds to need for efficiency within reformed system
- Capitalizes on existing community relationships
- Supports FCHD mission
- Addresses (in part) provider shortages



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FCHD Priority Strategy: Create Efficient, Effective Access to Services

Ensure that FCHD's facilities, team members, programs, and services are operating as efficiently as possible while providing effective high quality services.

Rationale:

- Assists with addressing priority health needs
- Responds to need for efficiency within reformed system, including expanded use of EHR
- Supports FCHD mission
- Links FCHD initiatives to priority needs
- Improves divisional coordination
- Improves internal/external communication



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Key Process Outcomes: FCHD Goals and Objectives

To support the execution of its strategies FCHD defined its associated goals and objectives. The achievement of those goals and objectives is further supported by a detailed work plan.



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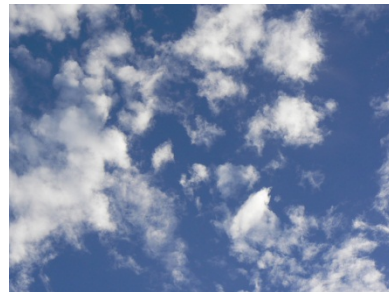
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Components to Achieve Strategic Vision



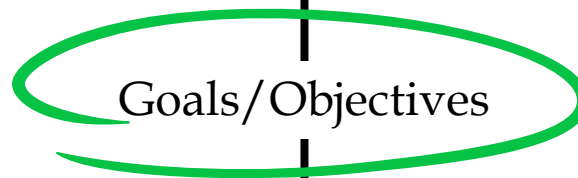
Strategic Vision

Where we want to be



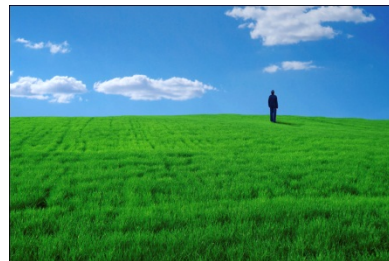
Strategies

Major initiatives to lead organization toward strategic vision



Goals/Objectives

Tactics and metrics required to support strategies



Action Steps

What needs to be done by when and whom to reach objectives

FCHD Strategic Goals/Objectives

- Key objectives were defined to support the execution of the strategies
- Objectives and associated implementation plans were developed by each of FCHD's divisions, listed below:
 - Administration
 - Behavioral Health Services
 - Community Health Services
 - Developmental Center
 - Environmental Health
 - Health Care Connection
 - Public Health Preparedness
 - School Health
 - Scott Key Center



FCHD Strategic Goals/Objectives

In summary, based on input from each division, FCHD is positioned to execute its strategic plan with a focus on the following organization-wide strategic objectives:

- Increasing integration and connectivity with staff, payors, patients, and the community
- Evaluating and improving current care delivery models and processes
- Developing new relationships/partnerships with community providers and resources
- Improving internal and external education and communication
- Promoting efficiency as a priority throughout the organization

FCHD's implementation/work plan will serve as the roadmap for the achievement of these objectives. During the coming years FCHD will be consistently monitoring its progress based on the steps and timeline outlined in that work plan.