



# STRATEGIC PLAN

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*PREPARED BY*

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***“HELPING NONPROFITS DO GOOD, BETTER”***

**FREDERICK COUNTY HEALTH CARE COALITION  
STRATEGIC PLAN**

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**Background of the Coalition**

The Frederick County Health Care Coalition (FCHCC) was created in 2006 and incorporated as a 501(c)(3) nonprofit organization in the State of Maryland in 2009. Since its inception, the Coalition has supported the Frederick County Health Department and the Frederick Health Hospital in carrying out the Community Health Needs Assessment (CHNA) first on a five-year, now three-year, basis. The Local Health Improvement Plans (LHIPs) that result from these assessments are implemented by Local Health Improvement Committees (LHICs); the Coalition oversees the work of these Committees.

At one point in the past, the Coalition received funds to assist people without access to insurance, screening and referring them to collaborating health care providers, and paying for necessary lab work and medications. With the advent of the Affordable Care Act, this service was no longer deemed to be necessary.

Since its inception, the Coalition has struggled to carve out an identity and a purpose separate from those of the Frederick County Health Department, the Community Health Needs Assessment, and the Local Health Improvement Plans. With new leadership and membership on the Board, the Coalition entered into this strategic planning process to address this issue.

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**Description of Strategy Formation Process**

The consultant met with the Executive Committee of the Coalition, in person, to plan the engagement, then met twice with the entire Board, once in person, and once virtually, due to the onset of the COVID-19 pandemic. [All meetings referred to in this document, with the exception of the clergy focus group, happened virtually, due to this pandemic. The clergy focus group was held prior to the order to quarantine].

The entire board met with the consultant four times over the course of three months, as follows:

- Session #1 – Precursor to full retreat. Drafted Mission Statement; began work on Vision Statement.
- Session #2 – Part One of strategic planning retreat. Finalized Mission Statement; drafted Vision Statement; identified the Coalition’s strengths, challenges, opportunities and barriers.
- Session #3 – Part Two of strategic planning retreat. Reviewed the results of the focus groups; identified the Coalition’s five critical (strategic) issues. Following the retreat, the Board met in small groups to develop strategies for each of the five critical issues.
- Session #4 – Began to tackle one of the five critical issues: What Do We Do?

The Consultant and Executive Committee then began work on the more detailed Operational (Annual) Plans for each of the five critical issues. As of the writing of this document one and one-half plans had been written, and one final planning meeting will be held.

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### **Summary of Focus Groups**

For the Environmental Scan portion of the process, the consultant met with approximately 23 people in four focus groups: area clergy, early childhood educators, major Frederick funders, and representatives from the Frederick Center, which provides services for the LGBTQ+ community. Typically, respondents in an Environmental Scan focus on the organization's strengths, challenges, barriers and opportunities. In this case, because few of the respondents were familiar with the Coalition, the discussions centered on what such a group could do to address wide-scale health-related issues in Frederick.

The results of these discussions are summarized in a chart, attached. After discussing the access and equity issues, each focus group identified some of the things an organization like the Coalition could undertake to address them. These include:

- Legislative Advocacy at the county and state level
- Other forms of advocacy
- Systems change
- Systems coordination and integration
- Education and training
- Direct service provision

The Coalition Board took these into account at the fourth session when they discussed the projects and activities in which the Coalition should engage.

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### **Mission and Vision**

The Mission and Vision Statements developed by the Coalition during the retreat have to be voted on by the Coalition at one of its next meetings. They are as follows:

#### **MISSION:**

***Improve wellness and resiliency to equitably  
impact the lifelong health of all  
Frederick County residents***

#### **VISION:**

***Our community is productive, resilient, and thriving because all people have a  
voice in their health and equitable access to the opportunities and resources  
necessary to prosper and to be physically and emotionally healthy***

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### **FCHCC's Strengths**

An organization's strengths are those resources, processes, programs and people, *internal* to the organization, that will be employed to address its critical issues and carry out its strategic plan. In the first part of the strategic planning retreat, the group identified the following

Coalition strengths:

- Community leader and decision-maker representation on the board
- Recipient of strong support from the Frederick County Health Department
- Involvement in the Local Health Improvement Plans in the community
- A shared common vision
- Openness to listening to all points of view
- Willingness to be inventive

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### **FCHCC's Challenges**

Challenges are those factors, also internal to the organization and over which it has some control, that must be addressed and/or strengthened in order to be the most effective organization possible. Often these challenges are included as goals in the Strategic Plan.

Retreat participants named a number of challenges:

#### Structure

- No staff; all volunteers
- Most members are new; learning curve is steep; new subject matter for some
- Lack key voices needed to be effective
- Little organizational infrastructure: committees, policies, procedures, etc.
- Outdated bylaws and Articles of Incorporation
- No office space, phones, computers, systems, etc.
- No money or dedicated sources of funds
- As a 501(c)(3) Health Care Coalition, may lack access to certain state funds
- No time

#### Identity

- Lack of primary purpose
- Limited recognition in community and State
- Name of the organization may not fit with the Mission
- Lack of understanding of where Coalition fits in the community
- Lack of identity separate from that of the Health Department

#### Influence

- Not clear if the Coalition has the power/influence to make changes
- Limited recognition in the community and state

- Lack of strong government collaborators
- LHIPs and Coalition unsure what Coalition can do with LHIP's recommendations

### Knowledge

- Don't know all of the inequalities/disparities/issues of all groups in Frederick, e.g., veterans and LGBTQ+ communities
- Don't know who the stakeholders are and how to involve them

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### **FCHCC's Barriers**

Barriers, or threats, are adverse factors *external* to the organization over which it does not have control but may have influence. The organization must take them into account ahead of time when formulating its Strategic Plan in order not to be blindsided during the Plan implementation, or to start off on an unsustainable path. The COVID-19 pandemic presented the two major threats identified by the Coalition Board:

- Potential funding for Coalition activities may have been diverted to community partners who are directly involved in addressing the ramifications of COVID-19
- The mental and physical health and social needs of the community have increased due to the pandemic, thereby increasing the scope of the issues to be addressed by the Coalition

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### **FCHCC's Opportunities/Collaborations**

Opportunities for partnerships, funding, programming, etc. are those items external to the Coalition that can be taken advantage of to help address the critical issues outlined in the strategic plan. Here are the FCHCC's opportunities as outlined at the retreat:

- Frederick Health Hospital's finance model rewards population health, presenting a continuing collaboration opportunity
- The Hospital Services Cost Review Commission grant is becoming available shortly and will require collaboration with the Frederick Health Hospital
- The Livable Frederick 2020 Master Plan outlines goals similar to those of the Coalition and undoubtedly would welcome collaboration in implementing the Plan
- CommUNITY 2030, the City of Frederick's 10-year strategic plan, addresses many of the social determinants of health that are important to the Coalition
- Extensive research is available regarding how to talk about health and wellness; the Frameworks Institute is one source
- COVID-19 has made people aware of health disparities and inequality and has brought the awareness of the importance of health and healthcare to the forefront and has
- COVID-19 has created additional funding opportunities, including from the local funders group
- Potential collaborators include the Frederick County Public Schools, the three local institutes of higher education, local and state government, and businesses

- Emergency response teams are potential collaborators in cases of health and natural disaster

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### **FCHCC's Critical Issues and Strategies**

During the second half of the strategic planning retreat, the consultant challenged the board - taking into account their Mission, Vision, strengths, challenges, barriers and opportunities - to come up with the five critical issues the Coalition must address in the coming years. Stating these issues in the form of questions aids in developing the activities that must be undertaken to tackle each issue.

The five Critical Issues identified, and the questions which gave rise to them, are as follows:

#### **1. Who are we?**

- How do we build organizational commitment to our mission and vision? What do we mean by 'Coalition'? Coalition of organizations and/or of individuals?
- How do we identify our primary stakeholders?
- How do we define ourselves?
- What is the relationship between the Coalition and the LHIPs? How are we going to define it?
- How do we maintain the support and involvement of the Health Department and yet create our own identity and stand on our own?

#### **2. What do we do? Why are we here? What is our purpose?**

- How do we decide what we're going to do?
- How are we going to apply an equity lens to our work?
- How do we integrate behavioral health into the larger discussion?
- How are we going to hold the public officials accountable to what they need to do to help us fulfill our Mission and Vision?
- How do we involve state and local government leaders in our work?
- How do we broaden our influence?
- What is our work in relation to the LHIPs?

#### **3. What do we need internally to do our work effectively?**

- How do we go about building our hard and soft infrastructure? How do we decide if we need to?
- How will we continue moving forward once we have established our objectives? How do we stay relevant? How do we identify and recruit new people to carry on the work?
- How do we support our work financially? How do we bring in not only local but state and other funders?
- Does our name fit our Mission and Vision? Do we need to change it?
- How do we communicate with the community – both outgoing and incoming?

#### 4. What more do we need to know to be most effective?

- How do we educate ourselves about all of the inequities faced by the various groups in Frederick?

#### 5. How do we amplify our work?

- How are we going to align the major resources in our County to accomplish our Vision?
- How are we going to add value to the work that is already happening in the County?
- How do we identify the partners that we need to be collaborating with?
- Who do we need to help us meet our Mission?
- How do we get the community invested in our goals?

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### **FCHCC's Strategies**

Following the first three sessions, the Board created five groups to develop the strategies for each of the critical issues. The groups met together and devised the following strategies, which have been revised slightly for clarity and to avoid overlap. [A strategy is a coordinated set of actions created to carry out the non-profit's mission].

#### **Who are we?**

**Strategies:** We will define what 'Coalition' means to us. We will look at other coalition structures and compare who they are to who we may want to be. We will work with the FCHD and Frederick Health leadership to define our work with the LHIP workgroups and the CHNA process and develop MOUs as necessary. We will identify our stakeholders. We will describe and assess our current organization and our stage of organizational maturity to inform our objectives and plans for growth. Based on the decisions made in our 2<sup>nd</sup> Critical Issue, we will decide whether to keep or change the name of the organization.

#### **What is our purpose? What do we do? Why are we here?**

**Strategies:** We will determine the purpose of the Coalition. We will use existing resources to determine the content of our advocacy and systems coordination work. We will take the LHIP's work into consideration as we plan our activities. We will meet with community leaders to understand the gaps in organizational structures in our community. Based on this information, we decide on 2-4 priorities to address in the next several years. We will apply an equity lens in all that we do.

#### **What do we need internally to do our work effectively?**

**Strategies:** We will revise/establish written documentation, including by-laws, policies and procedures. We will assess and revise our committee structure to support the Strategic Plan. We will establish board recruiting, retention and ongoing board development policies and procedures. We will identify desirable new board member characteristics and will recruit members who can provide ethnic and other diversity to the organization. We will create an annual planning process. We will revise our current website to better reflect the organization,

with the goal to develop a dedicated, independent presence in the community. We will create a social media presence, as needed and appropriate. We will identify staffing needs to support our work. We will identify, explore, and apply to private and government sources of financial support.

### **What more do we need to know to be most effective?**

**Strategies:** We will research and learn what wellness and resiliency are and how they are achieved. We will investigate diversity and inclusion strategies that work to create wellness and resiliency. We will understand the role of our health care system in delivering health to our community. We will create a process for ongoing board education to create shared knowledge. We will develop an understanding of the interplay of systems affecting health, mental health, wellness, resiliency, and equity. We will understand the part a theory of change plays in the Health Care Coalition's role as a change agent/catalyst.

### **How do we amplify our work?**

**Strategies:** We will identify the existing health/wellness-related resources in the County, determine the most appropriate partners, establish relationships with them, understand what they do, and educate to them about the Coalition. We will establish protocols for coordinating with identified resources and consider creating a coalition of coalitions. We will reach out to the Chamber of Commerce/other businesses, underrepresented community leaders, and local government to educate them about the Coalition and determine how we can partner with them. We will determine how best to communicate to the community who we are, what we do, and what our impact will be, as well as how best to hear feedback from the community.

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### **FCHCC's Purpose**

The need to define the Coalition's purpose was deemed to be of such importance that the Board agreed to an additional session to begin to tackle it before proceeding with additional planning. Using the framework that came out of the focus groups to guide their discussion, the Board defined the Coalition's purpose as ***to engage in non-legislative advocacy and in system integration and coordination***. This purpose does not rule out that the Coalition may, at certain times, engage in legislative advocacy and/or education in training, as long as these activities are in service to the broader purpose.

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### **Next Steps**

As mentioned previously, the Board has begun its work on the first year Operational Plans (and has already diligently begun working on the first activity!). An additional board session will be held to complete the Operational Plans for the 2021 fiscal year.

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It has been a pleasure to work with the Coalition. You have done a tremendous job in defining your critical issues and beginning to chart your path toward addressing each of them. You are well on your way to creating a community that is ***“productive, resilient, and thriving because all people have a voice in their health and equitable access to the opportunities and resources necessary to prosper and to be physically and emotionally healthy”***.