Strategic Plan 2023-2025

Vanderburgh County Health Department

VANDERBURGH COUNTY HEALTH DEPARTMENT

Prevent. Promote. Protect. Partner.

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A Message from the Health Officer

The Vanderburgh County Health Department is pleased to present the Strategic Plan 2023-2025.

A review of the Community Health Needs Assessment (CHNA) continues to show the key priorities for the community have not changed. There is still a need to address maternal child health, elevated rates of infant mortality, drug use, behavioral health, exercise, weight, and nutrition along with inadequate access to health care.

Dr. Kris Box, Indiana State Health Commissioner, recently reiterated the expansion of home visitation programs to reduce maternal and infant mortality in Indiana as such as Pre to 3 and Nurse Family Partnership. Dr. Box stated all but 18 counties in Indiana have some form of home visitation program and the State of Indiana is looking to expand into all counties over the next several years.

Vanderburgh County is looking to continue funding the Pre to 3 Program and actually grow the program to serve as many as possible (up to 1000 of the local births). In reviewing the literature, the states that have home visitation programs report similar findings as espoused by Ohio:

"Home visiting is one of the Ohio Department of Medicaid's most critical strategies for reducing infant mortality. As a result, in part, of the Ohio Department of Medicaid's investment in home visiting, Ohio has seen fewer preterm births and shorter stays in neonatal intensive care units. What I love about the Home Visit programs is they take the needs of the expectant parents and hear what they need to have a healthy delivery. They try to meet those needs," said Bernadette Kerrigan."

We are again discussing with the Sherriff about re-instituting the Recidivism Reduction Program in the jail setting as the initial program was so successful.

Our programs for smoking reduction, Freedom from Smoking, and pre-diabetic program, Diabetes Prevention Program, will be continued. It remains one of our most subscribed programs and has been re-engineered to attract a larger, more varied demographic.

Last year, the Vanderburgh County Health Department purchased a Mobile Clinic to help address the access to care difficulties and the mobile unit continues to be extremely versatile for immunizations and STD services.

This is also the year we begin our push for reaccreditation.

R. Kenneth Spear M.D. FACP, FACCP

Vanderburgh County Health Officer

Executive Summary

The Vanderburgh County Health Department's Strategic Plan is designed to reflect our vision, mission, values, and guiding principles. We aim to serve our at-risk populations by addressing both health and racial disparities, health literacy, and most importantly the lack of access to care. This is accomplished through culturally competent programming.

The process for developing the strategic plan started by meeting with the Vanderburgh County Board of Health. During this meeting, the Board of Health reviewed the Health Department's previous strategic plan and provided feedback on ways we could improve the plan. The information presented in the strategic plan stems from the Community Health Needs Assessment (CHNA), the Community Health Improvement Plan (CHIP), and the Board of Health's recommendations.

Before developing the new strategic plan, Vanderburgh County Health Department staff members came together as a committee and reviewed the Board of Health's feedback. During this meeting they discussed the changes that needed to be made and how they were going to approach making those changes. The committee then reviewed the CHNA and CHIP. While reviewing the CHIP, their focus was on the Behavioral Health Plan, Exercise, Weight, and Nutrition Plan, and Maternal Child Health Plan. They used the goals from these plans to help guide them in the creation of the five main goals for this strategic plan. The goals concentrate on enhancing communication, cooperation, and collaboration both internally and externally, creating a work environment centered on quality improvement, improving the health of the community with a special focus on vulnerable populations and racial disparities, collecting and analyzing data to measure public health outcomes, and fostering an equitable and inclusive environment.

Once the main goals were established, the committee identified the objectives and how they were going to measure them. The staff at the health department completed a SWOT analysis during a staff meeting. A SWOT analysis reviews the strengths, weakness, opportunities, and threats at the Health Department. After the SWOT analysis was complete, they began creating the strategic plan.

To ensure that the Health Department is meeting the goals, two accreditation committees are in place, Workforce Development and Performance Management/Quality Improvement. These committees meet at least once per quarter and are instrumental in developing a training plan for staff, completing quality improvement projects, and monitoring the performance of the Health Department as a whole. These committees allow the Health Department to evaluate the strategic plan on an on-going basis.

The Vanderburgh County Health Department would like to express their gratitude to the Board of Health, the Health Department accreditation committee, and the driving force behind all that they do, health officer, Dr. R. Kenneth Spear.

The VCHD Strategic Planning Process

The Vanderburgh County Health Department, in collaboration with other local public health officials, has created a vision for a modern public health system that will ensure basic public protections that are critical to the health of the Vanderburgh County community. This vision includes access to safe and healthy food, health promotion, disease prevention, and the response to new health threats including emerging infectious diseases and the opioid crisis. One of the biggest strategic issues facing Public Health today and, in the future, will be how to achieve this vision of public health while acknowledging limited resources and funding. Therefore, the strategic plan is centered around these emerging issues.

In our 2022 strategic planning session, VCHD staff identified key strengths, weaknesses, opportunities and threats facing public health over the next three years. Strengths that were identified include the Health Department's accreditation, that they are community driven, and employ staff that are committed and knowledgeable, ensuring a strong public health workforce. Some weaknesses identified include their financial dependence on county government and lack of community awareness regarding the services the Health Department has to offer. It was identified that there are opportunities to improve social media presence, focus on department growth and expansion, and address racial disparities and vulnerable populations. Threats that were identified are employee retention and turnover, the loss of grant funding, and community mental health needs.

The Vanderburgh County Health Department works closely with our Board of Health to discuss and decide on the strategic direction of health department activities. This is completed through discussions at board meetings and additional strategic plan work meetings. The Board of Health provides recommendations and insights that have been included in this plan and are outlined in *Appendix 1*.

The Vanderburgh County community is growing and evolving. As the community changes, the future programs and workforce provided will also need to change. The Vanderburgh County Health Department will be receiving additional allocated funding through the state in January 2024 through the Health First Indiana initiative. This additional funding will help expand core public health services and will be utilized to carry out the strategic priorities. With this funding, the VCHD will be able to hire additional staff members and expand programs and services in Vanderburgh County and also in other counties in Indiana. The following goals and objectives will guide the VCHD through 2025 in alignment with the CHNA and CHIP to improve the health of Vanderburgh County. The Strategic Plan will be reviewed and revised on an as-needed basis.

The Vanderburgh County Health Department works closely with our community partners such as the local hospitals, ECHO, Southwestern Behavioral Health Care, Purdue, Welborn Foundation, local minority organizations, and other community-based organizations to improve the health of the community and carry out strategic priorities. In addition, the VCHD works closely with local city government and local county government to meet the needs of the community.

Vision

A strong vibrant Health Department recognized as a leading advocate for the health and wellbeing of the community.

Mission

We exist to serve our clients and the community. We will work with our community partners to:

- Develop and provide quality health services
- Promote healthy lifestyles
- Protect against and prevent the spread of disease
- Assure preparedness to achieve and maintain the best public health for our community

Guiding Principles

- Evidence-based Public Health Practice: We will use evidence-based approaches in developing, implementing and evaluating programs and policies.
- Stakeholder and Partnership Engagement: Public health solutions require collaboration with a variety of partners and stakeholders. We will engage stakeholders and partners in the development, implementation and evaluation of strategies, policies and programs to advance the public's health.
- Transparency: We will work to ensure trust and establish a system of transparency, public participation and collaboration. Transparency promotes accountability, builds trust and keeps stakeholders and partners informed of our activities.
- Health Equity: Health equity exists when all people have the opportunity to attain their full health potential and no one is disadvantaged. We will proactively pursue the elimination of health inequities and preventable differences in health among groups based on gender identity, sexual orientation, race and ethnicity, education, income, disability and geographic location.

Our Values

At Vanderburgh County Health Department, we believe in:

Ethics: *We explicitly identify and debate the principles and values that guide our public health decision-making, and we identify and include stakeholders in that process.*

Diversity: *We actively seek to understand the life and work experiences, skills, talents, cultures, ancestries, and histories of our employees and the pubic to better serve everyone.*

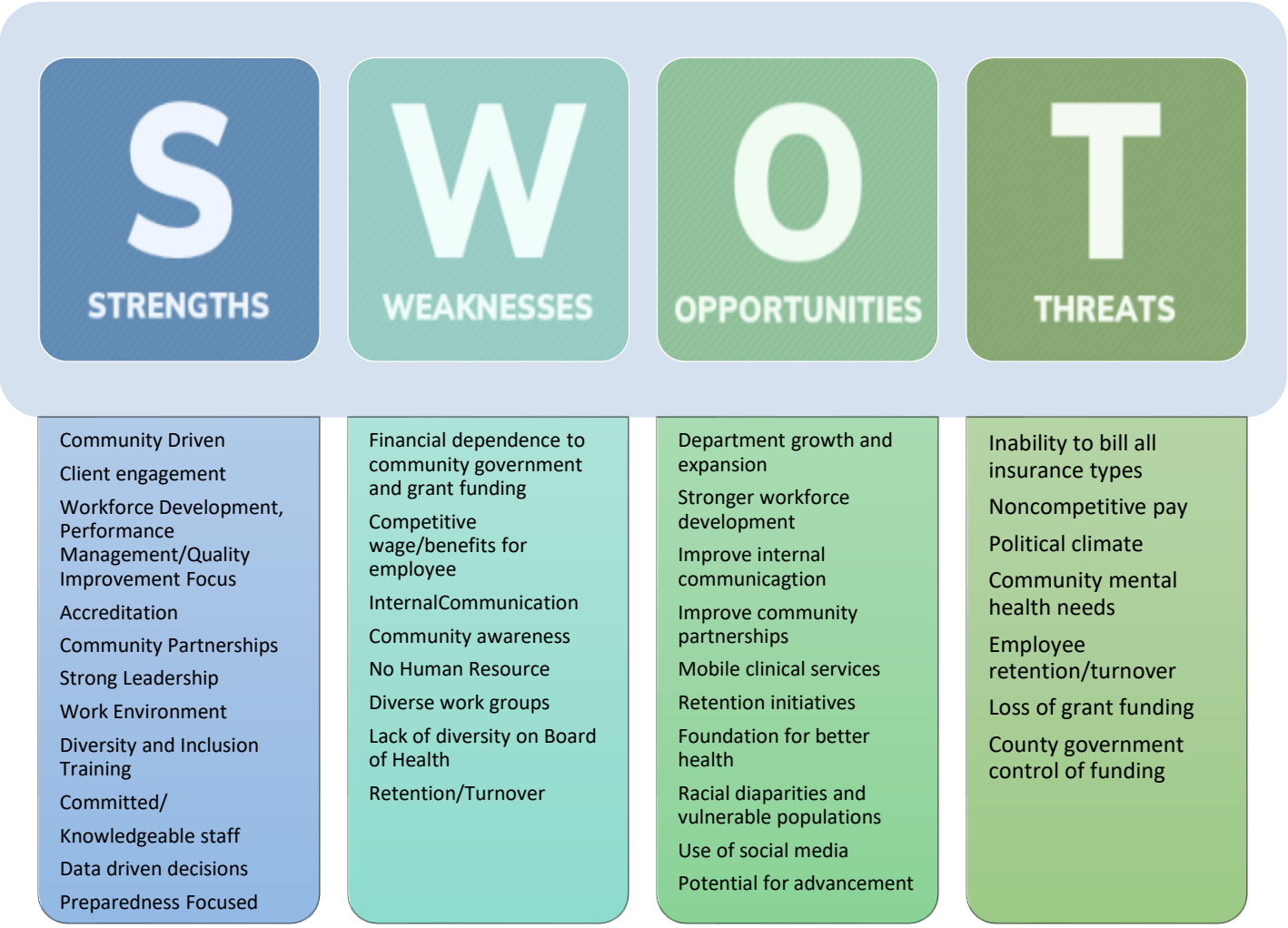
Respect: *We take the time to ask "questions for understanding" and fully consider other points of view before we make decisions.*

Communication: *We engage in timely, responsive, effective and open information sharing to improve our work and maintain our reputation as a trusted source of health information.*

Collaboration: *We work side-by-side with partners, communities, and individuals to improve health and support a strong public health system.*

Preparedness: *We are qualified and equipped to respond to threats and emergencies.*

SWOT Analysis



Summary of Strategic Priorities

There are five priorities that were established based on the SWOT analysis. Those priorities are (1) to increase communication and collaboration both within and outside of the Health Department; (2) create a work environment that is centered on quality improvement, assurance, and robust workforce development program; (3) foster an inclusive and equitable environment in the workplace and with the community we serve; (4) increase use of data collection to measure and improve health outcomes and track program effectiveness; and (5) address racial disparities and vulnerable populations in relationship to chronic disease, communicable disease, and maternal/child health.

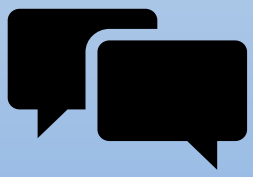
These priorities were based on the crosscutting themes, emerging issues, and departmental assets. The themes include communication, technology (data), preparedness, diversity, and engagement. Funding, loss of grants, and retention/turnover were the emerging issues that were determined. There was an array of departmental assets identified which include strong leadership, community driven, accreditation, diversity and

inclusion, and a full-time health officer with a strong quality and data background who has a vision and encourages the Health Department to achieve more.

2023-2025 Strategic Objectives and Measures

Goals for Improving Public Health

Goal 1: Increase communication and collaboration both within and outside of the Health Department

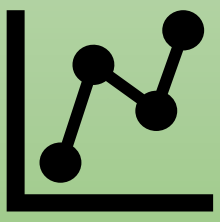


Objective 1: Improve communication and teamwork within and between the divisions

- **Measure 1**: Maintain leadership huddles weekly for leadership communication
- **Measure 2**: Implement department huddles daily for improved communication at all levels
- **Measure 3**: Biannual all-staff meetings for staff to communicate information
- **Measure 4**: Develop and send out a monthly newsletter to all VCHD staff by December 2023

Objective 2: Improved utilization of social media to increase communication with public

- **Measure 1**: Engage all VCHD departments in developing social media posts
- **Measure 2**: Share community partner information on social media and VCHD website
- **Measure 3**: Develop calendar for social media posts for all platforms
- **Measure 4**: Analyze reach and engagement of social media posts and platforms to more effectively share information
- **Measure 5**: Update VCHD website in a timely manner with new information for the public



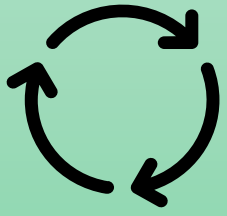
Objective 3: Be the identified agency for data collection for Vanderburgh County health information

- **Measure 1**: Provide, collect, and analyze local data for community programs
- **Measure 2**: Update website monthly to provide the community with easy access to local health data
- **Measure 3**: Provide quarterly data sheets and highlights with VCHD employees, community stakeholders, and on VCHD website
- **Measure 4**: Provide data collection processes and tools to all VCHD programs and departments

Goal 2: Create a work environment that is centered on quality improvement, quality assurance, and robust Workforce Development program

Objective 1: Advance staff understanding of quality improvement, quality assurance, and Workforce Development

- **Measure 1**: Provide training on quality improvement annually
- **Measure 2**: New employees will complete Six Sigma While Belt training within 6 months of hire date
- **Measure 3**: Provide training on quality assurance annually
- **Measure 4**: Provide training on Workforce Development annually



Objective 2: Foster an environemnt centered around quality improvement

- **Measure 1**: Have a current quality improvement plan
- **Measure 2**: Review/revise plan at least annually
- **Measure 3**: Have process in place for staff to suggest quality improvement project ideas
- **Measure 4**: Complete at least 2 quality improvement projects annually

Objective 3: Foster an environment of continuous learning and professional development

- **Measure 1**: Have current Workforce Development plan
- **Measure 2**: Develop annual training curriculum based off workforce competency assessment
- **Measure 3**: Complete a learning needs assessment and workforce competency assessment every 3 years
- **Measure 4**: Continue to seek unique ways to advance staff and employee education with community partners

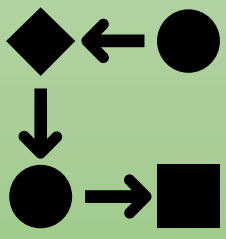
Goal 3: Foster an inclusive and equitable environment in the workplace and with the community we serve with IDEA (inclusion, diversity, equity, and antiracism) principles

Objective 1: Improve health equity and inclusivity within the workplace

- **Measure 1**: Reflect on current practices at the Health Department related to health equity and inclusivity for employees
- **Measure 2**: Review and revise department policies related to equity and inclusivity in staffing practices
- **Measure 3**: Complete a health equity assessment for all staff annually

Objective 2: Improve health equity and inclusivity practices within the community and clients we serve

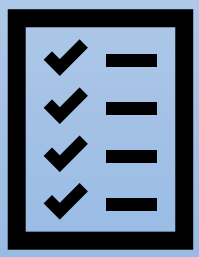
- **Measure 1**: Review and revise program policy and procedures to include equity and inclusivity practices
- **Measure 2**: Provide training to all staff related to equity and inclusivity in the workplace annually at a minimum
- **Measure 3**: Provide training to all staff related to equity and inclusivity in the community and with clients annually at a minimum
- **Measure 4**: Require diversity and inclusion training provided by the University of Evansville for all new employees within the first year



Objective 3: Evaluate and expand health equity and inclusivity within Health department programming

- **Measure 1**: Collect and analyze program data related to health equity, inclusivity, access to care, and disparities quarterly
- **Measure 2**: Research and apply for additional funding opportunities to improve health equity and access to care in the community
- **Measure 3**: Partner with community organizations on projects to improve health equity, access to care, and address disparities in the community

Goal 4: Increase use of data collection to measure and improve health outcomes and track program effectiveness



Objective 1: Develop and implement key performance indicators and outcomes for each department

- **Measure 1**: Department supervisors and directors to research key performance indicator and outcomes for program areas
- **Measure 2**: Department supervisors and directors to collaborate with data team to develop outcome measures
- **Measure 3**: Develop and implement key performance indicator and outcomes reports to be shared with employees and community stakeholders

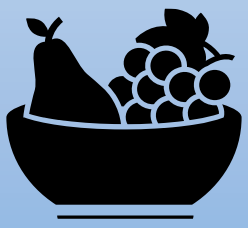
Objective 2: Develop and implement data collection for each department

- **Measure 1**: Department supervisors and directors to evaluate current data collection tools and methods
- **Measure 2**: Department supervisors and directors to reasearch best practice data collection methods
- **Measure 3**: Improve data collection methods throughout the Health Department as needed
- **Measure 4**: Develop a formalized plan for reporting internal data

Objective 3: Build a culture of data-driven decision making within Health Department programs

- **Measure 1**: Provide training and education on data collection methods and importance
- **Measure 2**: Utilize data collection on key performance indicators to drive program changes
- **Measure 3**: Explore funding opportunities for staff and software applications
- **Measure 4**: Advocate for further funding from county government to support data collection and methods

Goal 5: Address racial disparities and vulnerable populations in relationship to chronic disease, communicable disease, and maternal/child health



Objective 1: Improve the nutrition, health, and weight of community with special focus on health equity and vulnerable populations

- **Measure 1**: Collect and report program data specific to diparities an health equity in Health Department programs
- **Measure 2**: Track community and programmatic outcomes
- **Measure 3**: Collaborate with community partners to increase referrals and access to phsyical activity and healthful foods

Objective 2: Provide treatment and reduce transmission of sexually transmitted disease with special focus on disparities and health equity

- **Measure 1**: Develop and implement awareness campaigns to address misconceptions and reduce risk of exposure
- **Measure 2**: Provide diagnosis, treatment, and investigations of sexually transmitted disease
- **Measure 3**: Provide data collection and epidemiology support to the community and individuals

Objective 3: Provide treatment, education, and reduce spread and burden of commuicable diseases with special focus on disparities and health equity

- **Measure 1**: Serve as community experts on reportable diseases and health hazards with evidence-based and data-driven treatment
- **Measure 2**: Grow initiatives to address vaccine administration to the most vulnerable populations with use of mobile unit
- **Measure 3**: Provide case management of reportable diseases and health hazards
- **Measure 4**: Collect and analyze data related to communicable disease within the community
- **Measure 5**: Develop and implement awareness campaigns to provide education and reduce risk of exposure
- **Measure 6**: engage and coordinate with community preparedness partners to develop and maintain ability of community to prepare for, withstand, and recover from incidents of public health significance

Objective 4: Address and improve maternal/child health outcomes for at risk and vulnerable populations in our community

- **Measure 1**: Identify local maternal/child data that identify risk factors for mortality
- **Measure 2**: Share local maternal/child outcome data to local and state partners
- **Measure 3**: Leverage of Governors Public Health Commission funding for current programming to expand services within the community
- **Measure 4**: Leverage 501c3 status to seek private funding for continued support of programming addressing maternal/child health
- **Measure 5**: Seek Indiana Department of Health (IDOH) funding opportunities for continued support of programming
- **Measure 6:** Create Community Action Team (CAT)

Measure of Success:

Goal 1: Increase communication and collaboration both within and outside of the Health Department	
Baseline	**Target**
Results of an employee satisfaction survey with the question “VCHD keeps me informed and up-to-date” resulted with baseline rate of employees that “agree” is 70%	Percentage of employees that “agree” will increase in 80% by December 2025
Results of an employee satisfaction survey with question “Administration communicates VCHD news effectively and in a timely manner" resulted with baseline rate of employees that "agree" at 68%	Percentage of employees that "agree" will increase to 75% by December 2025
Current social media reach in the last 90 days was 193.4K, engagement was 35.3K, and followers on Facebook were 7,694	By December 2025, social media reach in the last 90 days will be 200K, engagement will be 45K, and followers on Facebook will be 8,500

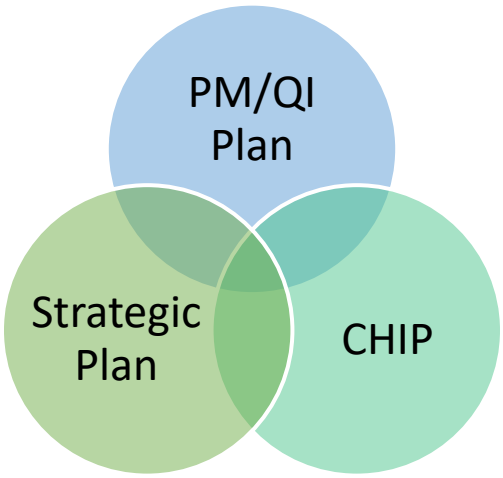
Goal 2: Create a work environment that is centered on quality improvement, quality assurance, and robust Workforce Development program	
Baseline	**Target**
Results of Workforce Development Core Competency assessment related to policy development/program planning skills resulted with an average baseline score of 2.53	Average score related to policy development/program planning skills will increase to 3.0 by December 2025
Results of Workforce Development Core Competency assessment showed average baseline scores for domains 1-8 as follows 2.56	Average score for domains 1-8 will increase to 3.0 by December 2025

Goal 3: Foster an inclusive and equitable environment in the workplace and with the community we serve with IDEA (inclusion, diversity, equity, and antiracism) principles	
Baseline	**Target**
Results of an equity assessment for all staff showed an average baseline score of 2.83	Average score related to equity and inclusivity will increase to 3.0 by December 2025
According to the US News World Report 2022, the equity score for Vanderburgh County was 48	The equity score for Vanderburgh County will increase to 50 by December 2025

Goal 4: Increase use of data collection to measure and improve health outcomes and track program effectiveness	
Baseline	**Target**
Results of Workforce Development Core Competency assessment related to data collection and use resulted with an average baseline score of 2.38	Average score related to data collection and use will increase to 3.0 by December 2025
Currently, 100% of VCHD departments have goals developed through the Performance Management system	Maintain 100% of VCHD departments developing annual goals through the Performance Management system with tracking and reporting methods included

Goal 5: Address racial disparities and vulnerable populations in relationship to chronic disease, communicable disease, and maternal/child health	
Baseline	**Target**
According to Robert Wood Johnson Foundation County Health Rankings, Vanderburgh County's rate of physical inactivity was 33%	This rate will be 30% by December 2025
According to Robert Wood Johnson Foundation County Health Rankings, Vanderburgh County's rate of Chlamydia was 613.4/100,000 population	This will lower by 5% by December 2025
According to VCHD data, the number of Syphilis cases in 2022 was 263	The number of Syphilis cases will reduce by 10%
According to the Indiana Department of Health (IDOH), the infant mortality rate for Vanderburgh County for 2021 was 6.7/1,000 live births	The infant mortality rate will decrease to 6.0/1,000 live births by December 2025
According to IDOH, the completion rate for the vaccination series 4:3:1:3:3:1:4 was 74% for Vanderburgh County	The completion rate for the series will increase to 78% by December 2025

Linkages with the CHIP and QI Plan



In 2022, the VCHD, in collaboration with local community partners, conducted a community-wide health assessment for Vanderburgh County to identify the needs of the community. VCHD in collaboration with Deaconess, St. Vincent, and ECHO began the CHIP process to identify, address, and improve the top health priorities. The PM/QI Plan thus allows the VCHD to improve their policy-making process and the outcomes produced. It is important that the Strategic Plan, CHIP, and the PM/QI Plan align in order to create effective initiatives and activities. The Strategic Plan has been developed with these other community plans in mind to ensure aligned goals, priorities, and strategies. Appendix 3 includes a table showing the relationship between plans.

Strategic Plan Monitoring

Strategic Plan progress and monitoring will be the responsibility of the Accreditation Coordinator along with health department leadership. In addition to the Strategic Plan, an action plan for implementation has been developed. This action plan will serve as the method to monitor implementation progress and timelines for completion. This will include goals/objectives, action steps, and responsible parties. The action plan will be updated quarterly or on an as-needed basis. The action plan as been included in *Appendix 2*. This action plan will be updated quarterly in a separate document. Implementation of the Strategic Plan goals and objectives will be reviewed quarterly at leadership meetings within the Health Department. Progress updates will also be given at all-staff meetings within the Health Department and at Board of Health meetings semi-annually.

Appendix 1

Board of Health Discussion Notes

Recommendations from the Board of Health are listed below and have been included in the Strategic Plan. These recommendations were discussed during a Board of Health work meeting focusing on the Strategic Plan.

- Describe in more detail the role the Board of Health plays in developing the Strategic Plan.
- Describe in more detail how progress will be shared with the Board of Health
- Describe how the Strategic Plan relates to working with our community partners
- Within the goals, describe the different VCHD departments that are responsible for activities
- Relate the goals and objectives to the health outcomes in relationship to the CHIP and CHNA more clearly
- Explain how our programs are utilized in other counties
- List more information about support from local government officials
- Describe in more detail the use of public health funding

Appendix 2

Action Plan for Strategic Priorities

Strategic Plan Goals and Measures			
Goal/Objective	**Action Steps**	**Output/What you want to achieve with each action step**	**Responsible Party**
Goal 1: Increase communication and collaboration both within and outside of the Health Department			
Objective 1.1: Improve communication and teamwork within and between the divisions	Maintain leadership huddles weekly	Maintain and improve leadership communication	Administrator, Division supervisors/directors
	Implement daily department huddles	Improved communication within departments	Division supervisors/directors
	All-staff meeting held semi-annually	Improved communication with staff at all levels	Administrator
	Develop and send out a monthly newsletter by Aug 2023	Improved communication about health department info with staff at all levels	Accreditation Coordinator
Objective 1.2: Improved utilization of social media to increase communication with public	Engage VCHD departments in developing social media posts	Social media posts representing all VCHD departments	Data Team
	Share community partner posts on social media	Shared message with community partners	Data Team
	Develop calendar for social media posts	Consistent posting on social media	Data Team
	Analyze reach and engagement on social media posts	More effective social media posts reaching more people	Data Team
	Updated VCHD website	Well informed community	Division supervisors/directors
Objective 1.3: Be the identified agency for data collection for Vanderburgh County health information	Provide, collect, and analyze local data for community prorams	Current program data	Data Team and supervisors/directors
	Update website monthly to provide the community with easy access to local health data	An informed community	Data Team
	Provide quarterly data sheets and highlights with VCHD employees, community stakeholders, and on VCHD webiste	Informed community and partners	Data Team
	Provide data collection processess and tools to all VCHD programs and departments	Employees have better knowledge	Data Team
Goal 2: Create a work environment that is centered on quality improvement, quality assurance, and a robust Workforce Development Program			
Objective 2.1: Advance staff understanding of quality improvement, quality assurance, and Workforce Development	Provide training on quality improvement annually	Employees have better knowledge	Accreditation Coordinator
	New employees will complete Six Sigma White Belt training within 6 months of hire date	Employees have better knowledge	Supervisors/directors
	Provide training on quality improvement annually	Employees have better knowledge	Accreditation Coordinator
	Provide training on Workforce Development annually	Employees have better knowledge	Accreditation Coordinator
Objective 2.2: Foster an environment centered around quality improvement	Have a current quality improvement plan	Health department focused on QI	QI committee
	Review/revise plan at least annually	Updated and current plan	QI committee
	Have process in place for staff to suggest quality improvement project ideas	Empowered staff to recommend change	QI committee
	Complete at least 2 quality improvement projects annually	Continuous improvement/improved processes	QI committee
Objective 2.3: Foster an environment of continuous learning and professional development	Have current Workforce Development plan	Training needs identified with plan	PHAB Team
	Develop annual training curriculum based off workforce competency assessment	Employees have better knowledge	Supervisors/directors
	Complete a learning needs assessment and workforce completency assessment every 3 years	Monitor learning needs	Accreditation Coordinator
	Continue to seek unique ways to advance staff and employee education with community partners	Employees have better knowledge/satisfaction	Supervisors/directors

Goal 3: Foster an inclusive and equitable environment in the workplace and with the community we serve			
Objective 3.1 Improve health equity and inclusivity within the workplace	Reflect on current practices at the Health Department related to health equity and inclusivity for employees	Recognize needed changes	Supervisors/directors
	Review and revise department policies related to equity and inclusivity in staffing practices	More inclusive staff policies	Supervisors/directors
	Complete a health equity assessment for all staff annually	Assess knowledge and comfort with equity	Accreditation Coordinator
Objective 3.2: Improve health equity and inclusivity practices within the community and clients we serve	Review and revise program policy and procedures to include equity and inclusivity practices	Recognize needed changes	Supervisors/directors
	Provide training to all staff related to equity and inclusivity in the workplace annually at a minimum	Employees have better knowledge	Supervisors/directors
	Provide training to all staff related to equity and inclusivity in the community and with clients annually at a minimum	Employees have better knowledge	Supervisors/directors
	Require diversity and inclusion training provided by the University of Evansville for all new employees within their first year	Employees have better knowledge	Supervisors/directors
Objective 3.3: Evaluate and expand health equity and inclusivity within Health Department programming	Collect and analyze program data related to health equity, inclusivity, access to care, and dispartieis quarterly	Recognize needed changes	Supervisors/directors
	Research and apply for additional funding opportunities	Improved health equity and access to care in the community	Supervisors/directors
	Partner with community organizations on projects	Improved health equity and access to care in the community	Supervisors/directors
Goal 4: Increase use of data collection to measure and improve health outcomes and track program effectiveness			
Objective 4.1: Develop and implement key performance indicators and outcomes for each department	Department supervisors and directors to research key performance indicators and outcomes for program areas	Knowledge of KPI and outcomes	Supervisors/directors
	Department supervisors and directors to collaborate with data team to develop outcome measures	Data-driven programs	Supervisors/directors
	Develop and implement key performance indicators and outcome reports to be shared with employees and community partners	Data-driven programs	Supervisors/directors
Objective 4.2: Develop and implement data collection for each department	Department supervisors and directors to evaluate current data collection tools and methods	Knowledge of data collection	Supervisors/directors
	Department supervisors and directors to research best practice data collection methods	Knowledge of data collection	Supervisors/directors
	Improve data collection methods throughout the Health Department as needed	Data-driven programs	Supervisors/directors
	Develop a formalized plan for reporting internal data	Informed community and partners	Data Team
Objective 4.3: Build a culture of data-driven decision making within Health Department programs	Provide training and education on data collection methods and importance	Employees have better knowledge	Data Team
	Utilize data collection on key performance indicators to drive program changes	Data-driven programs	Data Team
	Explore funding opportunities for staff and software applications	Increased data infrastructure	Supervisors/directors
	Advocate for further funding from county government to support data collection and methods	Increased data infrastructure	Supervisors/directors

Goal 5: Address racial disparities and vulnerable populations in relationship to chonic disease, communicable disease, and maternal/child health			
Objective 5.1: Improve the nutrition, health, and weight of community with special focus on health equity and vulnerable populations	Collect and report program data specific to disparities and health equity in Health Department programs	Raise awareness about health equity and disparities	Supervisors/directors
	Track community and programmatic outcomes	Data-driven programs	Supervisors/directors and Data Team
	Collaborate with community partners to increase referrals and access to physical activity and healthful foods	Increase access to care	Supervisors/directors
Objective 5.2: Provide treatment and reduce transmission of sexually transmitted disease with special focus on disparities and health equity	Develop and implement awareness campaigns to address misconceptions and reduce risk of exposure	Raise awareness	CD Supervisor
	Provide diagnosis, treatment, and investigations of STDs	Reduce spread of disease	CD Staff
	Provide data collection and epidemiology support to the community and individuals	Reduce spread of disease	CD Staff and Data Team
Objective 5.3: Provide treatment, education, and reduce spread and burden of communicable diseases with special focus on disparities and equity	Serve as community experts on reportable diseases and health hazards with evidence-based and data-driven treatment	Resource to public and community partners	CD Staff
	Grow initiatives to address vaccine administration to the most vulnerable populations with use of mobile unit	Increase immunization rates	CD Staff
	Provide case management of reportable diseases and health hazards	Reduce spread of disease	CD Staff
	Collect and analyze data related to communicable disease within the community	Data-driven programs	CD Staff and Data Team
	Develop and implement awareness campaigns to provide education and reduce risk of exposure	Raise awareness and reduce spread of disease	CD Staff
	Engage and coordinate with community preparedness partners to develop and maintain ability of community to prepare for, withstand, and recover from incidents of public health significance	Community-wide emergency preparedness	Preparedness Coordinator
Objective 5.4: Address and improve maternal/child health outcomes for at risk and vulnerable populations in our community	Identify local maternal/child data that identify risk factors for mortality	Understand causes of maternal/child death	FIMR Coodinator
	Share local maternal/child outcome data to local and state partners	Informed community and partners	FIMR Coodinator
	Leverage of Governor's Public Health Commission funding for current programming to expand services within community	Expand access to care	Administration
	Leverage 501c3 status to seek private funding for continued support of programming addressing maternal/child health	Expand access to care	Administration
	Seek IDOH funding opportunities for continued support of programming	Expand access to care	Administration

Appendix 3

Relationship to other VCHD Plans

Strategic Goal	CHIP Alignment	CHNA Alignment	PM/QI Alignment	WFD Plan Alignment
Increase communication and collaboration both within and outside of the Health Department	Behavioral Health Plan, Exercise/Weight/Nutrition Plan, Maternal/Child Health Plan. Improving communication will positively impact these areas.	COVID-19 Response, Behavioral Health, Access to Care, Maternal/Child Health, Exercise/Weight/Nutrition	Objective 1, Objective 2, Objective 3, Objective 4, Objective 5	Goal 1, Goal 4
Create a work environment that is centered on quality improvement, quality assurance, and robust Workforce Development program	Behavioral Health Plan, Exercise/Weight/Nutrition Plan, Maternal/Child Health Plan. Having a knowledgeable workforce focused on quality improvement will positively impact these areas.	COVID-19 Response, Behavioral Health, Access to Care, Maternal/Child Health, Exercise/Weight/Nutrition	Objective 1, Objective 2, Objective 3, Objective 4, Objective 5, Objective 6	Goal 1, Goal 2, Goal 3, Goal 4,
Foster an inclusive and equitable environment in the workplace and with the community we serve with IDEA (inclusion, diversity, equity, and antiracism) principles	Behavioral Health Plan, Exercise/Weight/Nutrition Plan, Maternal/Child Health Plan. Having an inclusive and equitable environment in the workplace and community will positively impact these areas.	COVID-19 Response, Behavioral Health, Access to Care, Maternal/Child Health, Exercise/Weight/Nutrition	Objective 1, Objective 6	Goal 1, Goal 4, Goal 5
Increase use of data collection to measure and improve health outcomes and track program effectiveness	Behavioral Health Plan, Exercise/Weight/Nutrition Plan, Maternal/Child Health Plan. Accurately tracking progress, outcomes, and effectiveness will positively impact these areas.	COVID-19 Response, Behavioral Health, Access to Care, Maternal/Child Health, Exercise/Weight/Nutrition	Objective 2, Objective 3, Objective 4	Goal 1, Goal 2, Goal 3, Goal 4
Address racial disparities and vulnerable populations in relationship to chronic disease, communicable disease, and maternal/child health	Behavioral Health Plan, Exercise/Weight/Nutrition Plan, Maternal/Child Health Plan.	COVID-19 Response, Behavioral Health, Access to Care, Maternal/Child Health, Exercise/Weight/Nutrition	Objective 2, Objective 3	Goal 1, Goal 2, Goal 3, Goal 5