



BOULDER COUNTY PUBLIC HEALTH

Strategic Plan

2013 - 2018

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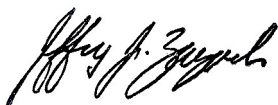
From the Director

Boulder County Public Health has a remarkable 50-year history of innovation and accomplishments in promoting and protecting the health and well-being of all people and the environment in Boulder County. These accomplishments are the result of our highly motivated, skilled, and experienced workforce, and a public that supports and expects the best in public service. The people behind our work remain our most important asset in addressing the ever-evolving health needs of our community.

In Boulder County, we hold ourselves to a high standard for health, wellness, and quality of life. Our high expectations are fueled by national “best of” lists that tout our Olympic-caliber athletes, locally grown “foodie” culture, and convenient bike paths. We treasure our landscape of rolling plains, foothills, and the Rocky Mountains, and our climate that promises 300+ days of sunshine, and we assume that all Boulder County residents are naturally drawn toward outdoor recreation. Health status data for the overall county population reflect our high expectations. In general, we smoke less, eat more healthy foods, exercise more intensively, and have lower rates of chronic disease than the nation as a whole.

At Boulder County Public Health, we know that terms like “overall” and “general” can lull us into complacency. With a mission to serve all people in Boulder County, we take seriously our responsibility to look deeper into the data to understand and act upon the additional health burden faced by populations with fewer opportunities for a healthy life. Most Boulder County residents would probably be surprised to learn that our binge drinking rates are among the highest in the nation, that child obesity has made alarming inroads in our community, and that nearly 20 percent of our children live in poverty. With decades of evidence demonstrating the negative impact poverty has on health, quality of life, and life expectancy, it is clear that there is still much work to do.

We recognize the many challenges between our community’s health status today and the vision we aspire to achieve for Boulder County in the future. We stand united against health inequities as unjust and unacceptable. Through this strategic plan, Boulder County Public Health is charting a course to ensure that our work is most effective in improving the health of all people in our community. Building on our past successes and the strength of our workforce, together we will make a profound difference!



Jeffrey J. Zayach
Public Health Director

Executive Summary

This plan lays out the steps for achieving our vision that ***Boulder County is a socially just, inclusive community where physical and mental health, social well-being, and the environment are valued, supported, and accessible to all.***

Over the next five years and beyond, nine key principles will serve as the unique “lens” through which we assess community issues, define the public health role in addressing those issues, and work to make significant and sustainable improvements to health in Boulder County. These ***guiding principles*** are:

1. Effectively using data and evidence-based strategies.
2. Promoting primary prevention and a population-based approaches.
3. Addressing the social determinants of health.
4. Initiating and strengthening partnerships toward making a collective impact.
5. Developing community capacity.
6. Empowering people to make informed decisions.
7. Promoting healthy policies.
8. Implementing strategies in a culturally and linguistically appropriate manner.
9. Working across programs and divisions.

The ***guiding principles*** are based on public health concepts that, together, embody public health practice, with a focus on population health. The concepts include:

- Collective impact
- Health equity (including the social determinants of health)
- Evidence-based practice
- Population-based practice
- Primary prevention

Adopting a Common Approach

In the next five years, we will align the organization in a common, effective approach to public health practice by systematically shifting programming and activities to incorporate the concepts of the guiding principles. In order to successfully make this shift, we must:

- Engage in thorough population health assessment and planning activities to prioritize health issues and determine agency role in addressing these issues.
- Enhance staff competency to implement population-based and collective impact strategies and promote practices to advance health equity.
- Assure the agency has adequate resources (such as funding, staffing, facilities) to implement the strategic plan.

Areas of Focus

Seven areas of focus will be the foundation of our work. They include a core set of public health services that are required to be available to all Coloradans, and they represent much of the exceptional work we currently do. We will enhance our ability to provide these services and improve community health by applying our guiding principles and focusing on cross-cutting, cross-divisional collaboration. The areas of focus are:

- Assessing, planning, and communicating
- Preventing, investigating, and controlling communicable disease
- Preparing for and responding to public health emergencies
- Protecting and improving the health of the environment
- Implementing prevention and health promotion practices
- Recording, reporting, and issuing birth and death records
- Governing and maintaining resources

Our Vision

Boulder County is a socially just, inclusive community where physical and mental health, social well-being, and the environment are valued, supported, and accessible to all.

Our Mission

Boulder County Public Health shall protect, promote, and enhance the health and well-being of all people and the environment in Boulder County.

Our Values

Understanding that we work for and are accountable to the public, we will model the following values in our interactions with the public, our partners, and one another.

Integrity

We will be honest and build trust through our interactions with the public, our partners, and each other. We will follow through on our commitments and be accountable to the agency values.

Respect and Compassion

We will demonstrate compassion, patience, and acceptance, and we will honor confidentiality. We will be non-judgmental and preserve dignity. We will actively listen to and honor the perspectives of others, promoting an environment of positive intent in our work with the public, our partners, and each other.

Teamwork and Collaboration

We will coordinate, communicate, and collaborate within our organization and in the community. We will engage others in achieving common goals and fostering opportunities for strengthening cooperative relationships.

Innovation

We will encourage creative and progressive problem-solving and service provision.

Personal and Professional Development

We will support personal and professional growth through the advancement of knowledge and experience, the delegation of responsibility, and through recognition of individual and team accomplishments.

Leadership

We will recognize that leadership lies within all of us. We will strive to inspire a shared vision, encourage and support one another, enable others to act, and challenge ourselves.

The Plan

Purpose

Strategic planning provides the opportunity to take a meaningful look at where our agency is today, where we would like to be in five years, and what is required to get there. This strategic plan provides a roadmap for what our agency plans to achieve; it defines the common direction, provides a guide for allocating resources, and incorporates the values and principles that will guide our decision making as we strive to accomplish our vision.

The strategic plan also is a required component of our effort to achieve accreditation through the national Public Health Accreditation Board (PHAB). PHAB sets quality standards for public health performance and rewards those health departments who meet the standards. Achieving accreditation demonstrates our commitment to improving service, value, and accountability to our community. In the future, it is possible that accreditation will determine eligibility for state and national funding and programming opportunities.

Process

The process of developing the Boulder County Public Health (BCPH) 2013 – 2018 Strategic Plan began in earnest in the summer of 2012. The process kicked off with a series of presentations by the Executive Director about accreditation, population-based health, prevention, and the need for a strategic plan. The BCPH Directors Team began putting words onto paper and shared their initial concepts with BCPH Management Team (i.e. directors and division managers) throughout the fall of 2012. In the winter of 2012 - 2013, the Management Team collectively became more involved in drafting the plan, and a consultant was hired to facilitate the process. The strategic direction, priorities, guiding principles, areas of focus, and framework were developed, discussed, and revised by Management Team throughout the process. BCPH staff had several opportunities to provide feedback throughout the process (See Appendix 3).

The values and vision are the end result of input collected from staff throughout the agency. Our values were reviewed and revised at our all-staff meeting in September 2012, and our vision was developed with staff input and finalized in February 2013.

Link to the Public Health Improvement Plan

The Colorado Public Health Act of 2008, and subsequent Colorado Department of Public Health and Environment (CDPHE) guidelines defining common indicators and core services, has been a call to action for local public health departments to organize their activities around common initiatives and practices. In 2008, we began a community assessment process resulting in our Public Health Improvement Plan priority areas – a key prerequisite for the creation of a strategic plan.

The Public Health Improvement Process was a broad external effort that engaged community members in identifying community priorities for advancing health in Boulder County. Boulder County Public Health will serve as the backbone organization, responsible for coordinating and convening the community, as well as providing financial and administrative support in order to make significant impact towards improving health in the three identified priority areas: healthy eating/active living, mental health, and substance abuse. This ongoing work is specifically included in the “Prevention and Health Promotion” area of focus in this strategic plan. However, these priority areas will also naturally be a part of many of the activities within our existing programs.

Strategic Direction

In the next five years, Boulder County Public Health will...

align the organization in a common, effective approach to public health practice by systematically shifting programming and activities to incorporate the concepts of the guiding principles; specifically, collective impact, social determinants of health, and population-based practice.

Priorities

To successfully align and shift our programming towards our strategic direction, Boulder County Public Health must...

- Engage in thorough population health assessment and planning activities to prioritize health issues and determine agency role in addressing these issues.
- Enhance staff competency to implement population-based and collective impact strategies and promote practices to advance health equity.
- Assure the agency has adequate resources (such as funding, staffing, facilities) to implement the strategic plan.

Guiding Principles

Over the next five years and beyond, the following nine key principles will serve as the unique “lens” through which we assess community issues, define the public health role in addressing those issues, and work to make significant and sustainable improvements to health in Boulder County. Boulder County Public Health will use these principles to guide our planning and decision making.

1. Examine data to identify issues and factors that significantly impact population health and contribute to morbidity, mortality, and loss of quality of life for people in Boulder County. Utilize data and evidence-based strategies to inform decisions, assure quality, and demonstrate outcomes in policies and programs.
2. Promote primary prevention and a population-based approach to maximize health impact at the broadest possible level.
3. Initiate, enhance, and promote efforts to address the social determinants of health to ensure health equity for people in Boulder County, and engage impacted populations to have a voice in shaping public health efforts.
4. Initiate and strengthen partnerships toward making a collective impact, including identifying a shared vision for change and setting common goals, establishing common data measurements for success, ensuring activities are mutually reinforcing, building the necessary infrastructure for success, and maintaining consistent and open communication.
5. Support the development of community capacity to provide coordinated services and avoid duplication of effort. Clarify appropriate roles of Boulder County Public Health and our partners in the public health system.
6. Ensure people in Boulder County are empowered and equipped to make informed decisions to adopt healthy behaviors.
7. Educate and inform policy-makers so they are able to set policies that protect and enhance the health of individuals, families, communities, and the environment.
8. Implement strategies in a culturally and linguistically appropriate manner.
9. Integrate assessment, planning, and interventions across programs and divisions.

The **guiding principles** are based on public health concepts that, together, embody public health practice, with a focus on population health. The concepts include:

- Collective impact
- Health equity (including the social determinants of health)
- Evidence-based practice
- Population-based practice
- Primary prevention

See Appendix 1: Glossary for definitions of each concept.

Areas of Focus

A core set of public health services are required to be available to all Coloradans. We will enhance our ability to provide these services and improve community health by applying our guiding principles and focusing on cross-cutting, cross-divisional collaboration.

Assessing, Planning, and Communicating

Identify and evaluate population health issues, health inequities, and potential threats to the public; inform and educate staff and the community about these issues; and use this knowledge to determine what strategies should be implemented to improve health.

1. Conduct periodic epidemiologic analysis of population health data in order to identify the issues significantly contributing to disease burden and risk for people in Boulder County. Among high-priority areas, engage in thorough health assessment and planning to identify and promote multifactorial strategies in collaboration with community partners. Determine the role of public health in addressing high impact issues.
2. Enhance and improve resources and staff competencies in health planning, epidemiology, policy development, and evaluation.
3. Assure appropriate evaluation of agency programs and interventions and their impact on population health.
4. Assure access to human subject research review for public health activities that may qualify as research.
5. Serve as a reliable, available, and easy-to-access clearinghouse for Boulder County population health data.
6. Prepare for and successfully complete accreditation and implement quality improvements, as necessary, to meet the required performance standards for accreditation and the *Colorado Minimum Quality Standards for Public Health Services*, as adopted by the Colorado Board of Health.
7. Work with staff and community partners to improve effectiveness and ensure consistency in delivering key public health messages to target audiences.

Preventing, Investigating, and Controlling Communicable Disease

Conduct surveillance, prevention, and control activities for communicable diseases of public health significance.

1. Monitor the incidence and distribution of communicable disease, and evaluate disease trends and emerging issues. Consistently employ sound epidemiologic and statistical methodologies to analyze, interpret, and report disease data.
2. Ensure that case and outbreak investigations are thorough and timely. Implement appropriate disease prevention and control measures using up-to-date and relevant protocols that are consistent with Colorado Department of Public Health and Environment guidelines and regulations.
3. Collaborate with health care providers, and build community capacity for disease prevention and control efforts.
4. Reduce the health impact of vaccine-preventable diseases using methods to monitor community childhood immunization levels, and promote immunization particularly among populations who are medically underserved.

Preparing for and Responding to Public Health Emergencies

Strengthen local, state, and federal partnerships to prepare for, respond to, and recover from public health emergencies.

1. Improve and enhance staff and agency capacity and competency to respond to emergencies and disasters by increasing depth and breadth of staff assignments in agency Incident Command System (ICS) management.
2. Enhance participation in all-hazards planning, training, exercises, and response activities to augment the role of public health in emergency response.
3. Coordinate with partners and strengthen relationships to develop depth in preparedness and response capabilities in Boulder County.
4. Promote preparedness and enhanced capabilities for emergency response among medical facilities.
5. Improve emergency communication strategies to activate emergency response personnel, inform the community, and sustain response communications in the event of a crisis requiring agency support.

Protecting and Improving the Health of the Environment

Protect and improve the quality of air, land, and water; assure the safety of food; mitigate vector-borne and other environmental threats; and advocate for sustainability.

1. Develop a methodology to define and evaluate the environmental factors that are actionable and most detrimental to the public and the environment, and use this information to better assess and prioritize current and future environmental health programming decisions, policies, and environmental health's appropriate role in addressing/impacting these issues.
2. Enhance agency and community capacity to protect against harmful impacts of current and emerging environmental threats.
3. Protect and enhance the quality of air and water through monitoring, licensing, mitigation of harmful releases, regulatory enforcement, and reduction in use of non-renewable resources.
4. Promote sustainability through energy, water, and waste efficiency by supporting implementation of the Boulder County Environmental Sustainability Plan.
5. Ensure safety of food through licensing and regulatory enforcement, promotion and further implementation of the Voluntary Retail Food Regulatory Program Standards, and active managerial controls of foodborne illness risk factors.
6. Promote a built environment that supports healthy living.
7. Promote healthy indoor environments, particularly for vulnerable populations, through investigations, policy advocacy, and coordination with enforcement and planning agencies.

Implementing Prevention and Health Promotion Practices

Plan, implement, and evaluate primary prevention and health promotion efforts to address population health issues in Boulder County. Engage the community in the implementation of the Public Health Improvement Plan.

Health Equity

Develop and enhance prevention and intervention systems that support child development and healthy and intended pregnancy. Enhance and increase protective factors for children, youth, and families through policy, services, and systems change.

Health Promotion

Focus our health promotion efforts on improving healthy eating, active living, and mental health, and reducing substance abuse and tobacco use, in order to prevent chronic disease and improve quality of life.

Health Systems

Collaborate with community partners to maximize opportunities through the Affordable Care Act for people in Boulder County.

Addiction Recovery Centers

Develop a plan that will facilitate further integration of substance abuse with mental health and integration of behavioral health with primary care services. Implement an interim organizational/administrative structure that offers the appropriate support for ongoing clinical services and addiction recovery programming. Develop a plan that will ensure the long-term stability and sustainability of Addiction Recovery Centers programming and services.

Recording, Reporting, and Issuing Birth and Death Certificates

Record deaths and issue birth and death certificates in compliance with Colorado Revised Statutes, Board of Health regulations, and Office of the State Registrar of Vital Statistics policies.

1. Assure accurate and timely recording of deaths of Boulder County residents.
2. Assure public accessibility to and accurate issuance of birth and death certificates.
3. Ensure the integrity and security of vital records.

Governing and Maintaining Resources

Establish and maintain programs, personnel, facilities, information technology, and other resources necessary to deliver core public health services.

1. Ensure that current recruitment and hiring practices enhance diversity and potential for long-term growth within and across the agency.
2. Assure staff capacity to implement public health programming by creating and resourcing formal employee development opportunities.
3. Assure employees have adequate space and facilities to accomplish public health programming.
4. Explore, implement, and support information technology solutions to enhance programming.
5. Assure that accurate and timely financial data are available at the funding source and project levels.
6. Investigate alternative budgeting frameworks.
7. Implement best practices in continuous quality improvement initiatives to increase efficiencies, decrease waste, and enhance services.

Monitoring, Evaluating, and Updating the Strategic Plan

The BCPH Management Team will be responsible for monitoring the progress of completing our five-year strategic plan. Key questions that will be answered while monitoring and evaluating the plan include:

- Are the goals within the Areas of Focus being achieved according to established timelines?
- Have we effectively enhanced staff competency to implement population-based and collective impact strategies, as well as promote practices to advance health equity?
 - If not, what else needs to happen, and by when?
- Do we have the capacity and have we been able to engage in thorough population health assessment and planning activities to prioritize health issues and determine agency role in addressing these issues?
 - If not, what else needs to happen?
- Are there adequate resources to meet goals (e.g. personnel, money, equipment, facilities, training)?
- Are the goals still realistic?
- What are we learning that can help improve our future planning activities?

Tools that will be used to inform the monitoring and evaluation process include the Public Health Improvement Plan updates, BCPH operational plans and annual reports, and external trends (e.g. funding loss, emergencies, etc.) that may affect implementation of this plan.

Monitoring and evaluation plans will be developed by the Management Team, and results will be reported to the Board of Health annually each spring. The report will include progress on achievement of goals outlined in the strategic plan, the community Public Health Improvement Plan, and the program operational plans. These annual reports will be available on the Boulder County Public Health website (www.BoulderCountyHealth.org) and the Healthy Boulder County dashboard (www.BoulderCountyHealthData.org) by April of each year.

The strategic plan will be formally updated on a five-year cycle; however, should answers to the above questions dictate a need for deviating from or making changes to the plan, updates will be made upon approval by the Management Team and the Board of Health.

APPENDIX 1: Glossary

Collective Impact

A long-term commitment by a group of important stakeholders from different sectors to a common agenda for solving a specific social problem. Their actions are supported by a shared measurement system, mutually reinforcing activities, ongoing communication, and are staffed by an independent backbone organization (J. Kania and M. Kramer, 2011).

Direct Services

Services delivered directly to clients. These services can include a strong prevention and education component, but are delivered mostly on a one-on-one basis (CDPHE, 2013).

Disease Burden

The impact of a health problem on a population measured by mortality, morbidity, financial cost, or other indicators.

Evidence-Based Strategies

Interventions that have been reviewed through quantitative and qualitative research and found to be effective in producing defined outcomes in specific populations. Not all interventions will have been reviewed for effectiveness, will have the same strength of evidence, or will be effective for all populations.

Guiding Principles

The means by which an organization intends to accomplish a strategic priority or objective. It summarizes a pattern across policies, programs, projects, decisions, and resource allocations (i.e. it is the lens through which we will accomplish our work).

Health Equity

Health equity is achieved when every person has the opportunity to attain their full health potential and no one is “disadvantaged from achieving this potential because of social position or other socially determined circumstances.” Health disparities or inequities are types of unfair health differences closely linked with social, economic, or environmental disadvantages that adversely affect groups of people (*Promoting Health Equity: A Resource to Help Communities Address Social Determinants of Health*, Centers for Disease Control and Prevention, 2008).

Population-Based Health

Defining health problems for a population; that is, a collection of people who share one or more personal or environmental characteristics, and analyzing the health problems by measuring, analyzing, and tracking information that is collected for the entire population or a sample of the population. Analysis explores a wide range of factors that determine health, including social, economic, physical, and environmental conditions.

In practice of population-based health, solutions to health problems are directed toward changing norms and behaviors for the entire population and generally involve changing systems and policies that have the potential to create sustainable change in the greatest number of people. Evidence-based practices and programs are used as much as possible, and primary prevention is given priority. Partnering with representatives of the population is also essential in assessment, planning, and implementation of population-based solutions.

In contrast, *direct health care services* define a health problem for a single individual and identify a solution that is received as a direct service by that individual.

Primary Prevention

Efforts aimed to prevent disease or health risk behavior from occurring. Encouraging people to protect themselves from the sun’s ultraviolet rays is an example of primary prevention of skin cancer.

Social Determinants of Health

Life enhancing resources, such as food supply, housing, economic and social relationships, transportation, education, and health care, whose distribution across populations effectively determines length and quality of life (James, Sherman A., *Social Determinants of Health: Implications for Intervening on Racial and Ethnic Health Disparities*, 2011).

Systems Level

A comprehensive view of the organizations, institutions, resources, and people that contribute to the improvement of health. This view recognizes the interdependence between the parts of the system, as well as the connection of system function to health outcomes. Systems-level change includes the assessment of barriers to resources and/or outcomes and the implementation of sustainable strategies that may include policy change, collaborative funding and investment, and ongoing research of effective strategies.

APPENDIX 2: Conceptual Framework

This framework has been developed by the BCPH Management Team with input from BCPH staff as a mechanism to help train and reinforce the concepts of collective impact. The framework, as a training and planning tool, helps to reinforce many of our guiding principles and will be one of the tools used to help develop staff capacity.



APPENDIX 3: SWOT (Strengths, Weaknesses, Opportunities, and Threats) Analysis

INTERNAL STRENGTHS	INTERNAL WEAKNESSES
Collaboration	
Strong and extensive collaborations with internal and external partners	Limited collaboration/cooperation with health care providers
Technology	
Excellent data storage, retention, and sharing	Obsolete and/or inflexible technology
Staff	
Skilled, motivated, educated, dedicated, and experienced staff	Lack of grant writing, research, and support capacity
Supportive Board of Health/Board of County Commissioners	Lack of data and epidemiologic/health planning capacity
Flexibility to respond to changing needs	Limited public health education of staff
Good reputation in the community	Lack of technological proficiency and support
Programming	
Broad programming reaches many sectors and addresses social determinants of health and social justice	Difficulty hiring staff representing key populations (persons of color, Spanish-speaking, LGBTQ, low socioeconomic status)
Commitment to data sharing and program evaluation	Limited initiatives addressing chronic disease and its risk factors
Funding	
Strong agency fiscal position	Lack of resources (FTE)/significant workloads
	Inconsistent/insecure funding
	Non-competitive salaries
Organizational Culture & Operations	
Commitment to develop staff's public health knowledge and skills	Unclear/cumbersome administrative processes
Adoption of Lean Six Sigma processes	Unclear and/or inconsistent internal communications; lack of trust/knowledge about decision making
Open internal communications	Lack of shared vision, definition of vision moving forward
Dedicated to continuous quality improvement	Lack of diversity among workforce and upper management
	Geographic isolation of upper management
	Loss of institutional knowledge due to staff attrition

EXTERNAL OPPORTUNITIES	EXTERNAL THREATS
Policy & Planning	
Local plans and policies that support public health (sustainability plan; On-site wastewater system regulations; tobacco, alcohol, and marijuana regulations)	Anti-public health policy and rhetoric (cottage foods, reproductive health)
Affordable Care Act (including early childhood home-visitation)	
Collaboration	
Shared data systems	
Strong network of partnerships	
Funding	
Medicaid expansion	Declining federal funding; increased community need
Increased funding from local communities, school districts, ballot initiatives	Perception of county as healthy; no funding needed
Accreditation	Reliance on external funding sources
Programming	
Alignment of programs with state plans	Limited evidence-based programming for key health concerns and social determinants of health
Well-documented research on early childhood development and chronic disease prevention	Health and environmental conditions (e.g. impacts of natural resource extraction, rabies, radon etc.)
Evidence-based practices in primary care	Lack of public awareness of public health's role
Integration of substance abuse and mental health	

APPENDIX 4: Plan Development

Discussion about and input for the 2013 - 2018 strategic plan was gathered through ongoing meetings, as listed below.

	All Staff	Directors	Managers	Program Staff	Board of Health
Date Range of Meetings	August – September 2012	July – November 2012	July 2012 – February 2013	December 2012 – February 2013	November 2012
Total Meetings	3	17	23	9	1

APPENDIX 5: Community Health System Capacity Assessment Findings

The Public Health Act of 2008 required that we conduct assessments of community capacity of the broader public health system to address health needs. In June 2011, as part of our Public Health Improvement Process, we conducted a [community capacity assessment](#). Both our Public Health Improvement Plan and this strategic plan were developed with the intent to improve on the needs identified in the assessment.

The assessment, based on the [10 essential services](#) of public health, highlighted the following needs, listed in priority order:

1. Monitor health status to identify community health problems.
2. Inform, educate, and empower people about health issues.
3. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.

These identified needs are addressed throughout this plan. Specifically, item 1 is addressed in the “Priorities” section of this strategic plan: “(we will) engage in thorough population health assessment and planning activities to prioritize health issues and determine agency role in addressing these issues.” By engaging in thorough assessment and planning, we will be better able to identify community health problems and will fully understand gaps in services. With this information, we will be better able to inform the community and link people to services.