EASTERN HIGHLANDS HEALTH DISTRICT

Strategic Plan FY 2025 – FY 2029

Our Vision…Promoting healthy people, healthy communities… healthier future.

Our Mission The Eastern Highlands Health District provides professional, people focused and community driven services, dedicated to enhancing the quality of life in our communities by preventing illness, promoting wellness, and protecting our environment.

Equitable · Responsive · Integrity · Knowledgeable · Professional · Resourceful · Respect

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Summary of Process

The Eastern Highlands Health District (EHHD) hired Emily Melnick Consulting, LLC to facilitate two four-hour retreats with staff, June 27th and July 15th, 2024 and one four-hour retreat with EHHD board members on July 18th, 2024. During these three sessions, staff and board discussed, revised, and recommitted to the EHHD's vision, values and guiding principles. Two internal staff workgroups worked between sessions to review and update the Mission Statement, and establish agency Guiding Principles.

Retreat participants also discussed strengths, weaknesses, opportunities, and threats (SWOT); and relevancy of previously charted strategic directions. Participants also engaged in a prioritization process to identify goals and objectives going forward. Several external resources and data sources were reviewed as part of the environmental scan which advised the planning process, including existing Community Health Needs Assessments (CHNAs) and Community Health Improvement Plans (CHIP), as well as DataHaven Community Wellbeing and Town Equity Reports. In addition, a survey of 102 Key Stakeholders was implemented in August 2024 via SurveyMonkey.

The EHHD Strategic Planning Committee finalized the Plan on November 6, 2024.

Strategic Plan Participants

EHHD Staff Participants: Robert Miller, Director of Health; Millie CW Brosseau, Ande Bloom, Cecile C. Serazo, Christopher Buter, Glenn H. Bagdoian, Lynette S. Swanson, Mia A. Mitoma, Thad D. King

EHHD Board Participants: John Elsesser (Coventry), Ryan Aylesworth (Mansfield), Jim Rupert (Bolton), Brian Foley (Tolland), Cathryn Silver-Smith (Ashford), Maria Capriola (Mansfield), Mark Walter (Columbia), Eric Anderson (Andover), James Drumm (Coventry)

Vision, Mission, and Values

Vision: *Promoting healthy people, healthy communities...healthier future...*

Mission: *The Eastern Highlands Health District provides professional, people focused and community driven services, dedicated to enhancing the quality of life in our communities by preventing illness, promoting wellness, and protecting our environment.*

Values: *Equitable, Integrity, Knowledgeable, Professional, Resourceful, Respect, Responsive*

Strengths, Weaknesses, Opportunities, & Threat Analysis (SWOT)

INTERNAL (WITHIN EHHD CONTROL)	
STRENGTHS • What does **EHHD** do well? • What are **EHHD'S** unique resources & role in community? What do others see as **EHHD'S** strengths?	**WEAKNESSES** • What can be improved? • What new or additional resources/activities do we need? • What do others see as **EHHD'S** weaknesses? • Where are **EHHD'S** resources less than others (e.g., What do we do that perhaps we shouldn't)?
ACTIONS: PRESERVE, PREVENT, PROTECT	**ACTIONS: MITIGATE, OVERCOME**

STAFF
 	
• Experienced/well trained workforce/Staff competence
   o Environmental health
   o Public health nursing
• Experts – applying science; trouble solving; problem solving
• Interpersonal skills
   o Empathetic, Trustworthy, Responsive, Capable, pragmatic, professional
   o Positive, hardworking
 	
• Good camaraderie/collaboration/team approach/support among staff/Function well together
• Good leadership management/admin
   o Not micro-managed
• Internal communication
• Help people
• Physically in the community
• Accessible
• Customer service/community interactions:
	STAFF
	• Turn-over/lack of retainment /RETIREMENTS
	• Loss of experienced staff due to retirement/attrition
	• Insufficient Workforce Development
	• Decentralized – remote office
	• Management
	• Uniform standards among employees
	• QIP
	• computer data entry for customers
	
	$
	• Insufficient funding
	• Grant driven
	• staff compensation
	   o flexibility & amount
	
	SERVICES/PROGRAMS
	• Food service program so we can track information
	• No travel vaccines

INTERNAL (WITHIN EHHD CONTROL)	
STRENGTHS (cont.)	**WEAKNESSES (cont.)**
- o Quick turnaround - o Responsive - Positive community impact – promote wellness/prevention - Communication - o with stakeholders - o Inspection communication with individuals/entities SERVICES - Diversity of services/activities offered - Public Education/community health programs - o HD promotion - o Regulatory info - o Environmental Health Enforcement – educational approach - Online applications - Flu clinics/vaccine outreach - Emergency – COVID - Crisis Management - Water – Issues - Lead paint issues ORGANIZATION - Learning environment - o Interesting/Variety - o Flexible, challenging, diversity, changing - Decentralized structure - Presence in member town - Integrated with other town staff - o Provide expertise to towns - Accessible to community members	- Limited array due to small size - Harm Reduction Services/Activities - Hoarding remediation "Rural" Health issues - Education re: water access- (new arrivals) ORGANIZATION/ADMIN - Spatial constraints/Office Space - Lack of central office facilities - Staffing structure - o Understaffed - o decentralized/external - o Collab/info sharing - o Staff level – Admin – middle management - SOPs - QI/CHN plan - Employee procedure manual - Workforce development plan - o Training program for new (environmental) staff - Succession plan - Specific performance or productivity measures to support resource needs - Evaluation metrics for each program - Progress toward agency accreditation TECHNOLOGY - Can't search documents online

INTERNAL (WITHIN EHHD CONTROL)	
STRENGTHS (cont.)	**WEAKNESSES (cont.)**
○ Decentralized service provided in the community ○ Interaction with community at events - Centralized online application process ○ Good communication with applicants **Collaboration** - Strong external community partnerships /team approach with: ○ Towns ○ Schools ○ UConn - Community Outreach - Good relationships with contractors **OTHER** - Use of MRC to assist with emergencies and support public health ○ Volunteer recruitment & retention (MRC) - Funding level ○ Well resourced (equipment) - Equipment available for job - Cost-effective to all communities leveraging resources	- Social media - Website - Online applications need to be more user-friendly Better network service on phones/hot spots - Updated computers - Technology – need newer/have gaps ○ Health inspections ▪ new inspection software ○ Tablet in field ○ Communication gap ○ Filemaker Pro software **Collaboration** - Lack of access to town officials - Need for consistency through the district (multi district approvals) - Town goals not aligned with EHHD goals - Lack of collaboration/referral with behavioral health serv. - improve partnerships with other HD - Linkages with human services agencies – Children' Health - Communication with towns on Education/issues **Marketing** - Lack of community awareness **OTHER** - Staff safety in community

EXTERNAL (OUTSIDE EHHD CONTROL)	
OPPORTUNITIES • What opportunities are open? • What trends can be taken advantage of? • How can we turn **EHHD'S** strengths into opportunities?	**THREATS** • What threats could harm EHHD? • What threats do **EHHD'S** weaknesses expose us to? • What external events are taking place that could hurt us and undermine our strengths and opportunities?
ACTIONS: CAPITALIZE, ENHANCE	ACTIONS: PREVENT, ISOLATE

<u>STAFF</u>
 	
• Medical Reserve Corps (more community events)
 	
<u>Programs</u>
• Cannabis use education
• Driving accidents
• PFAS – fire suits
 	
<u>Collaboration</u>
• Build off of "Good will" of pandemic response/existing good relationships with partners
   o UConn
   o Committee on Health care
   o School BP monitoring
   o Libraries
       ▪ STRATEGY: Encourage outside agencies to share public health messaging
   o Sister HDs
   o RBHAO_LPC
   o Municipal
	<u>$</u>
	• Reduced Funding levels from State
	• CTDPH per capita funding limits on use
	• Accreditation
	   o state policies re:$ CTDPH
	• Unfunded mandates
	• Special constraints
	• Lack of MH $
	• Inflation – rising operating expenses
	• State grant requirements
	
	<u>Politics</u>
	• Local
	   o Changes in selectman
	   o Alignment of EHHD & towns' goals
	<u>OTHER</u>
	• Climate change/Global Warming
	   o lack of cooling centers avail
	• Cyber threats
	• Bad publicity
	• Another pandemic
	• Lack of public trust

EXTERNAL (OUTSIDE EHHD CONTROL)	
OPPORTUNITIES (cont.)	**THREATS (cont.)**

○ State police   ○ fire   • Outreach – re: resources (B.H)
• Experts/educators in Pub. Health
• Promote Education of the public – role of sanitarians – promote public health, workforce opportunities
• Regional promotion of Eastern CT
 	
Marketing/Visibility/Awareness
• Staffing w/ partners – e.g., UCONN school -> grants (libraries)
   ○ STRATEGY: promote EHHD
• Branded material
• Interacting at Comm events
   ○ STRATEGY: increasing sharing information with public
• Use of social media
   ○ QR code promotion of website
$
• grant funds
• 3rd party billing
• Opioid $ leadership
• Transportation – state grant
 	
ORGANIZATION
• Strategic planning process
• FDA food code
Supports evaluation of program
	• Staff morale - workforce retention
	• Hospital closures
	• Group Homes use
	• Hospital system
	• Lack of state suicide data
	• Use of salt – roads
	   ○ Competition re: town roads
	• Regional agencies don't overlap with EHHD boundaries
	• Climate change and migration
	
	State forced consolidation

Key Informant Survey Results

In August 2024, 170 key stakeholders were asked to complete a ten-minute online survey via Survey Monkey. Survey respondents (n=102, 60%) represented stakeholders from all EHHD towns. Individual respondents fulfill a wide variety of community roles including town administrators and town board members (30%), local school and college personnel (19%), healthcare providers (14%), volunteers (13%), and community group members, faith based and private citizens (13%).

> **91% percent of key informant respondents rated the overall health of their community as healthy or very healthy!**

Stakeholder Communication

In the past year, most respondents communicated with EHHD via email (82%) or face to face (44%). Overall, 29% communicated via the EHHD website. Over half of these website users (52%) reported accessing the site 2 to 5 times during that period, while an additional (37%) accessed it 6 or more times. Website users found it "easy" or "very easy" to access information (96%), communicate with EHHD staff (92%) and complete required documentation (62%).

Top 5 EHHD Priorities of Key Informant Survey Respondents (N= 102, percent indicating priority):

1. **Informing, educating, and empowering people about health issues (60%)**
2. **Monitoring health status to identify community health problems (47%)**
3. **Linking people to needed personal health services and ensuring the provision of healthcare when otherwise unavailable (38%)**
4. **Mobilizing community partnerships to identify and solve health problems (27%)**
5. **Diagnosing and investigating health problems and health hazards in the community (27%)**

EHHD Staff Priority Identification Process Results

TOPIC	Food Code	Staffing	Workforce Development	Behavioral Health	SOP	Evaluation	Technology	Marketing	Collaboration/ Partnerships
Staff Member 1 S1	106	142	129	104	127	130	105	100	123
S2	134	133	122	117	117	103	121	114	126
S3	100	97	118	0	127	0	140	116	95
S4	133	130	129	126	111	0	109	109	113
S5	134	139	133	101	109	108	124	109	132
S6	131	119	104	0	132	0	98	119	85
S7	127	86	110	129	74	111	61	79	57
TOTAL SCORE	123.57	120.86	120.71	115.4	113.86	113.00	108.29	106.57	104.43
RANK	1	2	3	4	5	6	7	8	9

Board Goals/Priorities

The EHHD Board of Directors engaged in a priority identification process during their strategic planning retreat resulting in the following 4 areas to be highlighted and integrated into the FY25-29 Strategic Plan.:

1) Increase Community Education
   - Including enhanced use of social media
2) Increase Public Sector Confidence and Trust
   - Including efforts to address the current Political Climate & its Impact on Health and mitigate the threat to: public health expertise/legitimacy
     - Vaccine hesitancy
3) Ensure Growth and Sustainability of Health District through:
   - Advocacy focused on protecting our interests & financial resources
4) Impact/Address Environmental Contamination
   - water quality

Strategic Plan FY 2025-29 Overview

GOALS	1. Strengthen Organizational Capacity	2. Ensure Strong Governance & Fiscal Stability	3. Promote Workforce Development	4. Maintain Delivery of High-Quality Programs & Services	5. Increase public awareness of EHHD
OBJECTIVES	1.1 Upgrade Technology 1.2 Expand Office/meeting Space 1.3 Strengthen and Increase Community partnerships	2.1 Strengthen Board Governance 2.2 Monitor Grant Opportunities & Alternative Revenue Streams 2.3 Sustain Advocacy Efforts	3.1 Improve Staff Communication 3.2 Strengthen Staffing Model 3.3 Support State-wide Workforce Development	4.1. Enhance External Communication 4.2 Enhance Evaluation Capacity 4.3 Enhance Staffing &/ or Productivity 4.4 Increase Support for CHA/CHIP 4.5 Increase Efforts Addressing Environmental Problems 4.6 Explore Opportunities to Address Behavioral Health Challenges 4.7 Promote Health Equity	5.1 Develop Marketing Plan 5.2 Enhance Public Trust in Public Health

Strategic Plan Goals, Objectives & Activities

Goal #1: Strengthen Organizational Capacity

- **Objective 1.1:** Upgrade technological infrastructure to enhance operations and service delivery.

  - **Activities:**

    - Upgrade the EHHD's website platform.

    - Update field inspection and tracking software to align with FDA food codes.

    - Continue OpenGov build out, and look for other opportunities for software enhancements

- **Objective 1.2:** Expand office/meeting space or relocate as needed to support operational needs.

  - **Activities:**

    - Engage in the Town of Mansfield's facility planning process where appropriate.

    - Secure additional office/meeting space for the main office.

- **Objective 1.3:** Strengthen existing and increase new community partnerships.

  - **Activities:**

    - Continue participation in existing partnerships (e.g., Safety Committees, Emergency Planning, Schools, Towns, Healthcare, UConn).

    - Explore new partnerships with businesses, community organizations, council of governments, faith-based organizations, and higher education institutions.

Goal #2: Ensure Strong Governance and Financial Stability

- **Objective 2.1:** Strengthen board governance, including composition and committee assignments.
    - o **Activities:**
        - Encourage board participation from member towns, and leverage technology to support participation
        - Fully utilize standing committees and/or establish ad hoc committees to address specific issues .
        - Update Board Training Plan including:
            - Orientation for new board and ongoing education.
            - Incorporate brief training sessions into regular board meetings.

- **Objective 2.2:** Monitor grant opportunities and explore alternative revenue streams.
    - o **Activities:**
        - Expand the roster of private insurance payers.
        - Regularly review public and private grant opportunities and submit proposals where applicable.
        - Consider other possible revenue sources.

- **Objective 2.3:** Sustain advocacy efforts for state and local public health initiatives.
    - o **Activities:**
        - Actively engage in state and local public health policy discussions.
        - Advocate for increased state funding for Local Health Departments (LHDs).

Goal #3: Promote Workforce Development

- **Objective 3.1:** Improve internal staff communication across programs and services.

  - **Activities:**

    - Research and identify gaps in communication strategies.

    - Establish internal department communication plan. Establish related standard operating proceedures (SOP) as needed.

    - Update and ensure compliance with department communication plan(s). Update related SOPs as needed.

    - Hold regular staff meetings with program updates and share time-sensitive information.

- **Objective 3.2:** Strengthen the staffing model.

  - **Activities:**

    - Develop a succession plan for key leadership positions.

    - Review and enhance the agency's compensation package.

    - Improve the format and content of job postings.

    - Update the workforce development plan.

    - Establish Standard Operating Procedures for all positions

    - Identify opportunities to improve agency efficiency

    - Update the performance management system to reflective agency goals and objectives.

- **Objective 3.3:** Support state-wide workforce development initiatives.

  - **Activities:**

    - Participate in internship programs and state-sponsored orientation programs.

- Collaborate with higher education institutions to recruit interns and staff.

Goal #4: Maintain Delivery of High-Quality Programs and Services to Meet Public Health Needs

- **Objective 4.1:** Enhance communication between the Health District, municipalities, and partners.
  - **Activities:**
    - Identify key city departments/agencies that interact with (or may need to interact with) EHHD.
    - Establish external department communication/ Collaboration/ Plan
      - Establish Communication related SOPs
- **Objective 4.2:** Enhance program evaluation capabilities.
  - **Activities:**
    - Develop and implement a methodology for program evaluation and quality improvement aligned with PHAB standards.
- **Objective 4.3**: Address additional public health mandates with enhanced staffing or productivity.
  - **Activities:**
    - Identify opportunities to improve agency efficiency.
    - Develop a plan to transition CHWC/PHN programs off soft funding.
- **Objective 4.4:** Increase support for Community Health Assessment and Improvement Planning (CHA/CHIP).
  - **Activities:**
    - Participate in focus groups and key stakeholder interviews.
    - Maintain updated CHNA/CHIP information on the agency website and share findings with community stakeholders.
- **Objective 4.5: Increase efforts addressing Environmental Health Problems and Hazards**

- o **Activities:**
  - Track existing and identify emerging threats
  - Establish and Maintain SOP for investigation and mitigation of Environmental health hazards
  - Maintain a public health emergency operations plan

- **Objective 4.6: Explore opportunities to address behavioral health (BH) challenges**
  - o **Activities:**
    - Identify BH related initiatives/programs
    - Identify BH Partners and Collaboration opportunities

- **Objective 4.7: Promote health equity in programming and service delivery.**
  - o **Activities:**
    - Identify and implement tools to address health inequities in the community.
    - Align agency services with the National CLAS Standards

Goal #5: Increase Public Awareness of the Health District

- **Objective 5.1:** Develop and implement a comprehensive marketing plan
  - o **Activities:**
    - Seek input from town officials, committees, and partners.
    - Research and identify gaps in communication strategies.
    - Implement customer surveys (to evaluate how the public learns about EHHD programs, services, (and general) health information)
    - Increased use of social media to promote activities

- **Objective 5.2:** Enhance public trust in governmental public health.

  - **Activities:**

    - Explore the feasibility of posting food service establishment (FSE) inspection results online.

    - Continue providing weekly viral respiratory surveillance reports during peak seasons.

    - Implement/Increase vaccine hesitancy-reduction focused initiatives