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BACKGROUND & PROGRAMS
The Kendall County Health Department’s first annual report; referred to as the Kendall County Nurse Report, was completed in 1965. In November of 1972, the voters of Kendall County passed a referendum which established the Board of Health’s current governing structure. In 1996, Community Action, the health department, and Human Services merged into one health services organization governed by the Board of Health. In 2007, the health department became accredited. In 2010, the health department received specific governance accreditation. The Public Health Accreditation Board awarded the Health Department with this national recognition in 2016. In 2016 The Kendall County Health Department celebrated 50 years of community services and the Board of Health declared a Resolution of Appreciation in honor of this accomplishment.

The Kendall County Health Department has four units, each offering essential services and core functions in public health. The four units are organized into; Community Actions Services, Mental Health Services, Community Health Services (with emergency preparedness specialization embedded), and Environmental Health Services. Program Support is integrated into Community Action, Mental Health, Environmental Health, and Community Health. Program Support functions exist in order to serve every staff endeavor in the aforementioned areas so that staff may most effectively serve the health and well-being needs of our community.

For more program information see our annual reports on our web page (Annual Reports) The four unit program descriptions are as follows:

♦ COMMUNITY ACTION SERVICES PROGRAM DESCRIPTION

The Kendall County Health Department’s Community Action Services unit delivers services intended to assist low-income individuals and families to acquire useful skills and knowledge, gain access to new opportunities, and achieve economic self-sufficiency. We reach out to low-income people in both Kendall and Grundy counties, address their multiple needs through a comprehensive approach, develop partnerships with other organizations in the community, involve low-income clients in our agency operations, and administer a full range of coordinated programs designed to have a measurable impact on poverty.

♦ ENERGY EFFICIENCY SERVICES

In times of economic duress, many Kendall and Grundy County residents are finding that energy costs are placing acute stress on the household's budget. In some instances, the family is forced to make a choice regarding which bills to pay and what well-being needs are to be left unmet.

♦ The Low Income Home Energy Assistance Program (LIHEAP) and Percentage of Income Payment Plan (PIPP) are designed to help low-income households by offsetting the rising costs of home energy services through direct financial assistance, energy counseling, and education. Emergency furnace assistance is also available to eligible homeowners to repair or replace a non-operational heating system in order to restore heat.

♦ The ComEd “Special Hardship” is a program that assists families with their ComEd bill due to financial hardship. The Nicor Gas “Sharing Program” assists families with one-time per year financial assistance on their Nicor bill. Each of these energy efficiency programs is designed to help preserve and promote safe and healthful living conditions, while educating clients on ways in which to more wisely meet and budget for their cooling and heating needs. Money saved may be put to more pressing family needs. Energy counseling can also serve to promote a healthier outdoor environment by reducing our reliance on energy production.
Socio-Economic Self-Sufficiency Services

- Drive to Success is a service provided to eligible low income individuals to combat one of the most common barriers to obtaining and maintaining employment—affordable transportation. The program is designed to either assist with repairs or provide an applicant with a vehicle when available. In doing so, Drive to Success promotes individual and family self-sufficiency, and can serve to support our local job market and business proprietors. This program is provided for by Community Action and private donors.

- Employment Support is a program that enables low-income residents to secure and maintain permanent employment. Everyone’s path to employment is different. Persons who are just starting a new job after being unemployed may come across various barriers and obstacles that can prevent the transition from being unemployed to employed successfully. The program provides assistance to cover the cost of various needs such as transportation or work supplies to persons who have newly obtained employment.

- Homeless Prevention provides approved applicants with mortgage assistance or rental assistance. This assistance helps enable individuals and families to maintain their homes, promoting a stable family living environment, and in some cases, job stability.

- Helping Hands for School provides assistance to low-income families to purchase their child’s prescription glasses. For children, not having glasses when they are needed can lead to poor self-esteem, failure in the classroom, developmental delays, and learning disabilities. Worse yet, these uncorrected vision problems make it more difficult as a child grows older to climb out of poverty.

- Scholarship Program provides financial assistance to low income and disadvantaged persons for high academic attainment either with formal education or occupational training at an accredited Illinois educational institution. One of the most important tools to end a family’s cycle of poverty is to obtain skills or education that will lead to living wage employment.

Weatherization Science

- The Illinois Home Weatherization Assistance Program (IHWAP) lowers energy costs for low income families, particularly for the elderly, people with disabilities, and children. Funds are used to improve the energy efficiency of homes using the most advanced technologies and testing protocols available in the housing industry. By reducing the energy bills of low income families instead of offering monetary aid. Weatherization reduces dependency and liberates these funds for spending on more pressing family issues. Community Action Services delivers energy efficient services to eligible residents across the Kendall and Grundy Counties. Professionally trained staff use computerized energy audits and advanced diagnostic equipment to determine the most cost-effective energy efficiency measures appropriate for each home. Energy efficiency technicians also test furnaces and gas appliances for carbon monoxide leaks and combustion safety.

Typical weatherization services include installing insulation: sealing ducts; and stopping heat loss through windows, doors, and other infiltration points throughout the home and attic space. Clients are educated on the proper use and maintenance of the installed measures, and encouraged to integrate energy saving practices into their daily living routines.
MENTAL HEALTH SERVICES PROGRAM DESCRIPTION
Mental Health Services provides comprehensive and holistic services designed to meet diverse needs of the child, adolescent, and adult populations. Services are client focused, recovery driven, and vary in intensity depending on individual need. We take an integrated approach to all service endeavors, so that individuals with multiple diagnostic features may be served. Services include, but are not limited to, individual, group, and family counseling, as well as psycho education. We strive to deliver preventative and emergency crisis services designed for the assessment and immediate stabilization of acute symptoms of mental illness, alcohol and other drug abuse, and emotional distress or in response to acts of domestic violence or abuse/neglect. These services are designed to provide thorough assessment, intervention, and closure strategies to suicidal and crisis episodes. Prevention and diversion services deliver proactive services designed to reduce individual, family, and environmental risk factors, increase resiliency, enhance protective factors, and achieve individual and comprehensive community wellness.

COUNSELING SERVICES
We provide individual, family, group, and marital/couples counseling services to promote growth, development, and optimal functioning.

SCHOOL BASED COUNSELING SERVICES
We offer Kendall County schools the option of having a Mental Health and Substance Abuse Treatment Clinician present in the school for a two hour time period one day per week. These services are offered to Kendall County public and private schools as a way to promote access to treatment and help to remove any potential barriers from the treatment process.

PSYCHOLOGICAL TESTING
Psychological testing services are available for diagnostic clarification and for treatment support. Psychological testing is also available for fitness to stand trial, pre-employment, and fitness for duty.

PSYCHIATRIC TREATMENT
Psychiatric treatment services are available, when indicated, to support treatment and wellbeing.

SUBSTANCE ABUSE TREATMENT
We provide comprehensive outpatient services for the adolescent and adult individual addressing substance misuse problems. Individuals are supported as they learn to live their lives without the harmful consequences of substance use.

ANGER EVALUATIONS
We provide comprehensive anger evaluations to provide insight and, if necessary, treatment recommendations when there is a pattern of unhealthy emotional coping.

FITNESS RESTORATION
Court ordered education for individuals who have been found unfit to stand trial. Services are provided to increase mental stability, understanding of court/legal process, and to be an effective participant during trial.

TRAUMA FOCUSED SERVICES
Staff have also been increasing their knowledge of and focus on the provision of trauma-induced stress and related treatments; a cornerstone to fostering community resilience. Mental Health Services has expanded trauma focused questions on the psychosocial assessment to ensure that those individuals who have experienced or witnessed trauma have specific interventions that are both effective and meaningful.
*CRISIS & SUICIDE INTERVENTION SERVICES*
Services are provided on Kendall County campus sites to promote a low rumination plan, amelioration of psychiatric distress, meaningful support, and follow-up services. Services are available in English and Spanish and 24/7 support is available through the emergency crisis line.

*YOUTH BEHAVIORAL HEALTH COALITION*
We will launch a community-based coalition focused on mental health, substance abuse, and the overall wellbeing of youth and families in Kendall County. This coalition will be comprised of diverse community partners including schools, youth serving organizations, and health care providers. The intent of this coalition will be to share resources for comprehensive mental health wellbeing and to identify any trends or gaps in service. This coalition will also help to promote connection between Kendall County school social workers and counselors, who will no longer be working together in a county wide collaborative manner due to the dissolving of the Kendall County Special Education Cooperative.

*FORENSIC INTERVIEWING*
We work closely with the Kendall County Child Advocacy Center in serving and supporting victims of child abuse in a sensitive, respectful manner. Our skilled forensic professional interviewers perform interviews of child-victims in a neutral, non-suggestive atmosphere, following a uniformed protocol. Post-interview counseling services are made accessible to each child and family.

*TRANSITIONS PROGRAM*
The Transitions Program assists clients in maintaining their highest level of functioning, health, and independence. We provide psychosocial education/intervention, care coordination, senior counseling, and family system support. We not only work to foster a sense of well-being to survive and thrive, but also develop increased well-being and social connectedness. This is often a challenge for seniors experiencing economic stress, isolation, or lacking information on resources and opportunities that address such concerns. We raise individual and community awareness and promote access to services addressing mental health and substance abuse, social isolation, and financial instability. To foster and inspire our seniors' highest level of functioning, we advocate local resources improving one’s ability to interact with others, encourage healthy habits, and provide one-on-one care management.

*ENVIRONMENTAL HEALTH SERVICES PROGRAM DESCRIPTION*
Environmental Health Services delivers programs intended to produce mutually beneficial interrelationships between people and their environment, promote human health and well-being, and foster a safe and healthy environment. While the majority of the Unit’s services involve the implementation of state codes and local ordinances, each service is delivered with an educative approach.

*FOOD PROTECTION*
Reviewing plans for, permitting and inspecting, and educating and regulating the activities of all food service establishments, cafeterias, mobile food vendors, food caterers and commissaries, food trucks and temporary food events throughout Kendall County.

*PRIVATE SEWAGE DISPOSAL*
Reviewing plans for, and permitting and inspecting the construction of, new and repaired septic systems. Also included are plat review of proposed residential subdivisions, site evaluations of sites served by septic systems for building projects, Certificate of Occupancy and property transaction inspections, and the inspection of sewage pumping/hauling vehicles and associated sewage land application sites.
PRIVATE/SEMI-PRIVATE POTABLE WATER SUPPLY
Reviewing plans for, and permitting and inspecting the construction of, new and repaired private water wells, and water well abandonments. Additionally, plat review of proposed residential subdivisions, site evaluations of sites served by water well systems for building projects, Certificate of Occupancy, property transaction inspections, performing or providing guidance on the sampling and testing of private water supplies.

NON-COMMUNITY WATER SUPPLY
Performing routine inspections, and water supply sampling and testing of all private, non-community water supply systems (i.e., serving restaurants, taverns, churches, etc.) located within the County.

NUISANCE COMPLAINT INVESTIGATION
Includes the investigation and resolution of select public and environmental health-related complaints registered with the KCHD. Categories include but are not limited to air, land and water pollution; open burning, improper storage and disposal of garbage and refuse; stagnant water, the harborage and/or breeding of vermin.

TANNING FACILITY INSPECTION
Reviewing plans for, inspecting the operations of, and educating all State licensed tanning facilities located within the County.

INDOOR AIR QUALITY
Providing education and guidance to homeowners on the prevention and mitigation of conditions of indoor mold, and the testing for and mitigation of indoor radon gas.

SOLID WASTE & RECYCLING
Includes the permitting and inspection of solid waste haulers and pollution control facilities doing business in Kendall County, maintaining and promoting Countywide recycling efforts, monitoring solid waste related proposed legislation and investigating solid waste related complaints. The program is also responsible for maintaining the County’s State mandated Solid Waste Management Plan.

BODY ART INSPECTION
Reviewing plans for, inspecting the operations of, and educating all State licensed tattooing and body piercing businesses.

VECTOR-BORNE DISEASE SURVEILLANCE & PREVENTION
Investigating and eliminating potential breeding sites for, and providing education on the prevention of tick and mosquito-borne diseases. Collecting and testing mosquitoes and dead birds for the presence of the West Nile virus. Collecting ticks and providing to testing labs for the presence of Lyme Disease. Serving as a hub of information to multiple county jurisdictions.

COMMUNITY HEALTH SERVICES PROGRAM DESCRIPTION
Community Health Services focuses on promoting, protecting, and preserving the community’s health by encouraging and educating its residents about healthy lifestyles through the provision of community engagement services that are both person-centered and population based; and the performance of disease surveillance and prevention-based activities.

WOMEN, INFANT & CHILDREN PROGRAM (WIC)
WIC is a Supplemental Food and Nutrition Program funded through the Federal Government. Our clients receive healthy food packets conjointly with nutrition education and breastfeeding support. These benefits begin during pregnancy and continue for the baby/children until they reach five years of age.
FAMILY CASE MANAGEMENT (FCM)
FCM is provided through a State Grant. It is a comprehensive program integrated into the WIC program to insure that mothers with babies under the age of one receive a family health assessment and linkage to needed services available in our county. Other provisions under FCM include: Adverse Pregnancy Outcome Reporting System (APORS) and Healthworks. APORS is a program that provides mothers with complicated pregnancies or births an opportunity to have supplemental assistance through public health nurse visits and assistance with linkage of needed services. Illinois Department of Public Health requires all hospitals to report to local health departments, newborns born with high-risk health issues.

HEALTHWORKS
The Healthworks is funded by the State of Illinois as part of Department of Children and Family Services. It provides for medical case management services (immunizations and primary care physician visits) for children in the foster care system residing in Kendall County through the age of five. Healthworks also maintains a network of physicians, dentists, and specialty care doctors who provide medical care for these children.

IMMUNIZATION PROGRAM
This program provides necessary immunizations to infants, children, and adults at minimal cost to protect Kendall County residents from vaccine preventable diseases. Every year we provide the flu vaccine at a reasonable price.

COMMUNICABLE DISEASES
This program assists Community Health Services with prevention and control of the spread of communicable disease. These diseases are infectious and spread from person to person or from animal to person. Our clinical team provides constant surveillance with the assist of local community partners, surrounding counties, and state guidance and support to assure that Kendall County residents are protected and educated on current preventative methods.

TUBERCULOSIS (TB) CASE MANAGEMENT/CLINIC
Our nurses offer education and counseling on both latent and active TB. It is required at this time to report and treat only active TB cases but treatment is suggested for both. Through the rigorous management of both active and latent cases, we are able to coordinate care with our partners, local and state, to provide and meet our client's needs. We provide Direct Observation Therapy to ensure our clients are following the regulations set forth for treatment (prescribed medications and respiratory isolation as needed).

TRAVEL CLINIC
We provide shots needed for travel outside of the United States, available upon request. Through access on our web page at, individuals can complete an inquiry on their choice of destination and our clinician will review and call the individual back with needed immunizations and other pertinent information. All follow-ups are by appointment only.

DNA TESTING
Kendall County is a collection site for DNA Diagnostic Center, Lab Corporation, and others, providing DNA services that are both efficient and effective. Clients are referred as government cases or for legal purposes or private cases. DNA testing can be done for child support, child custody, immigrations, birth certificate, tax forms, will/estate, court order, adoption, or other legal issues, or strictly for knowledge.

EMERGENCY PREPAREDNESS & RESPONSE
Emergency Preparedness and Response is dedicated to planning for emergencies, preparing and fostering resilience across the community, practicing plans, and protecting residents. We are reducing risk by identifying hazards such as natural disaster, disease outbreaks, and bioterrorism and creating plans to effectively respond and recover if such events were to occur within our community.
STRATEGIC PLAN PROCESS
The Kendall County Health Department Board of Health initiated its strategic planning process in January 2016 through February of 2017 with the final adoption of Strategic Plan 2021. The planning process was facilitated by the Board of Health President, Ms. Christina Cooper and the Health Department Executive Director, Dr. Amaal Tokars. The Health Department was greatly assisted by Face to Face Consulting Principals, Ms. Gail Johnson and Ms. Pam Parr. We are also deeply appreciative of the several department staff and partner/stakeholders that contributed thoughtfully to the final details of the plan.

◆ WHY WE PLAN DIALOGUE

In laying the groundwork for the strategic planning process, it was important to establish a solid foundation for robust governance participation. Entering into dialogue on Why we Plan was facilitated by asking each board member to consider the benefits of strategic planning. Some of the key highlights of the discussion brought out the importance of strategic planning for educating the community, efficacy and efficiency, partnership development, integrated vision, and organizational learning (See Appendix page 52).

◆ WHAT PEOPLE MIGHT BE SURPRISED TO KNOW

Continuing to lay the groundwork for the strategic planning process, the Board of Health entered into an eye opening discussion on What People Might be Surprised to Know about the services of the Health Department. This process was facilitated through small group and large group discussion. It was notable that not a few, but many services were named through this process. A sampling of the many services named included suicide prevention, energy assistance, solid waste planning, travel clinic, and policy work. However, it was especially revealing through the discussion that certain community and partner sectors would naturally know about specific clusters of services related to their aspirations/needs/work, but might not know about other specific services less relevant to them. This revelation brought needed relief to the never-ending and unfulfilled attempt to convey all things to all community members, all at once. It helped to affirm and clarify a more reasonable approach to community communication that would involve a few key messages, to relevant stakeholders, delivered at intermittent times. (See list in Appendix page 51)

◆ HOW MAY WE COMMUNICATE ALL WE DO FOR THE COMMUNITY

As the board proceeded to consider how to best engage our community, a discussion ensued on How we May Communicating all we do for the Community. Many diverse modes of communication and vehicles for communication were brought forth through small group and large group discussion. Some of the diverse highlights included open house, local radio, Face book messaging, face-to-face engagement, and targeted messaging. Perhaps the most salient organizational learning that arose, was the understanding that these many opportunities to communicate in diverse ways should evolve based upon specific community aspirations, needs, and urgency. (See list in Appendix page 52)

◆ KEY STAKEHOLDER INTERRELATEDNESS

Identifying Health Department stakeholders and considering the perspective through which they have superficial or meaningful involvement in critical community services provided, is an important step in the planning process. A discussion was facilitated though the use of a Key External Stakeholder Analysis worksheet. The worksheet created space for specifically naming external stakeholders and for considering the type of involvement, they were invested in, related to Health Department programs and services. Each board member was asked to complete a worksheet individually in order to prepare them for small group and full board discussion. The most salient piece of final discussion centered on the ethical commitment to community and persons served as primary stakeholder. (See tool in Appendix page 56)
**MISSION & VISION REVIEW**

Reviewing and refreshing the organizational mission and vision provided fundamental guidance for organizational direction. The mission and vision a refreshed mission statement and a significantly revised vision statement. The refreshed mission statement more clearly describes the commitment to both person-based and population-based services. The revised vision statement resulted in a concise statement, “The Kendall County Board of Health is dedicated to promoting the health and well-being of the people in our community”. Additionally, it was decided that an abbreviated version of the vision statement would be placed as a by-line on special community communications.

**BRANDING & LOGO REVIEW**

As a finishing component to mission and vision development, the board also spent some time discussing organizational branding. As a coherent outward expression of the Health Department’s mission, it was important for the board to have an opportunity to review the local health department logo for consistency with the desire to communicate community commitment. The logo was refreshed slightly to give it an emblem effect and a new 50th anniversary logo was adopted to complement the existing logo. The logos will also be accompanied by the abbreviated version of the vision statement on special community communications. This layer of the strategic planning process expresses the aesthetic desire to serve community with equity and dignity and is in keeping with every effort of the health department that touches community.

**ASSESSING THE ORGANIZATIONAL ENVIRONMENT**

Assessing the health department’s organizational environment was facilitated through the use of three worksheet tools; Internal Assets and Opportunities, External Assets and Opportunities, and Distinctive Organizational Competencies. Board members were asked to complete individual worksheets in small groups in order to prepare for a full board discussion. Key internal assets included; competent staff, progressive vision, and compassion for others. Key internal opportunities included; being proactive amidst potential external threats and acting as role model for new employees. Key external assets included; advisory partnerships, 708 Board, and state grants. Key external opportunities included; encourage active participation of membership and surveillance of state budget crisis. Distinctive organizational competencies were also analyzed as an important lay in the environmental scan. Although many critical successes and capabilities were discussed, some gained resounding consensus. Some of the salient organizational competencies that arose included; the careful development of a solid financial reserve, a high quality workforce, and a commitment to organizational authenticity. (See tools in Appendix pages 53-55)

**IDENTIFICATION OF STRATEGIC PRIORITIES**

In preparing to develop strategic priorities, the board reflected together upon the previous elements of the strategic planning process. The initial discussions on community communication, the mission and vision, as well as the environmental scan were especially vital to the development of strategic priorities. The strategic priorities reached by consensus of the board of health are; community communication, fund diversification, stakeholder interrelatedness, and workforce development. The respective goals and actionable objectives are:
The Kendall County Health Department will employ methods of community communication that considers a thoughtful presence and responsiveness.

- Communicating access to services will continue to diversify; ranging from pushing out more sensitive health information to the public on Facebook from partnering with the treasurer’s office to make service information available to the community.
- Individual/Family Needs will be addressed with special engagement efforts being made to local libraries and multi-family housing.
- Migration challenges trends such as needy families entering or elders exiting the area will receive thoughtful response.
- Serving community will be communicated through newsletters being sent to local churches and schools.
- Act attentively to socioeconomic wellbeing issues by providing service information to local resale shops.

Continue to streamline fund diversification for the sustainability of community work.

- Focus on financial sustainability that gives consideration beyond the twelve months of a fiscal cycle.
- Use fiscal communication that is clear, concise, and appropriate for the respective audience.
- Deepen understanding of the insurance landscape in order to enhance modest claims through public-private partnership.
- Continue to maintain a healthy reserve preservation in order to create continuity of vital programs and services to the community.

Act with leadership on all matters of stakeholder interrelatedness.

- Community Health Planning will be informed by grant requirements and especially inspired by client/community needs.
- Participation in community health plan update will include day care and local library partners.
- New initiative of engagement will include homeless youth, local preschools, private schools, senior citizens, and war veterans.
- Increased program impact will be asserted by including Salvation Army and youth group leadership perspective on trending issues.
- Public partnerships will include creative resource dissemination.
- Good will outreach is an area of high priority related to key stakeholders.

Workforce Development will be informed by performance management, a readiness for change, and an appreciative perspective on learning organization.

- Continue to apply accreditation, national standards, and quality standards to our work.
- Use data trends, surveillance information, and electronic record informatics to inform responsiveness.
- Continue to examine what grant/resources are needed for program expansion, staff sustainability, and place-based services.

**IMPLEMENTATION & MONITORING**

Implementing the strategic priorities will occur throughout the strategic plan period. Monitoring of goals will be reflected in numeric as well as narrative description. Progress on the entire plan will be presented to the Board of Health each year, until a new strategic plan process begins.
STRATEGIC PRIORITIES
**Community Communication**

Employ Methods of community communication that considers presence and responsiveness

Public health has its roots in the prevention and control of communicable disease. While this remains a cornerstone of public health work, public health is invested in more than its community’s physical health; it is also invested in its community’s well-being. The World Health Organization (WHO) defined (a person or community’s) health in its 1948 constitution as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity."

Effective community communication is a centerpiece of public health work. Kendall County Health Department recognizes and values the significant role that effective community communication serves in the safeguarding of its public’s health and well-being. Healthy People 2020 defines communication in public health as “the art and technique of informing, influencing, and motivating individuals, institutions, the general public on the important issues of public health” (Domnariu, C. D., 2014).

The importance of providing meaningful and effective community communication is evidenced in part by the Ten Essential Services of Public Health. KCHD endeavors to inform, educate, and empower the people of its county about health issues (Essential Service #3); and to link our people to needed personal health services and assure the provision of health care when otherwise unavailable (Essential Service #7) (Centers for Disease Control and Prevention, 2016). With respect to the former, KCHD employs initiatives using health education and communication sciences to increase knowledge and shape attitudes to inform decision-making choices, and to develop skills and behaviors for healthy living. Applying the latter, KCHD identifies community populations with barriers to care; promotes effective entry into a coordinated system of clinical care; supports ongoing care management; and prepares and delivers culturally appropriate and targeted health information for at risk population groups.

KCHD works closely with local community health care providers to share basic public health education. It is of great benefit to our local public health system and to our community, that our physicians, nurses, and other health professionals possess some education in basic public health concepts and systems (National Academy of Medicine, 2003). Cultivate and fortifying partnerships and communication between public health and primary care promotes the timely and accurate communication of important public health issues and resources to our public.

According to Dr. Robert Carter, *Faculty Member, Public Health at American Public University*, the impact of immigration on public and healthcare systems is complex and not always easy to generalize. Differences among immigrant subgroups are significant and should be understood when discussing the impact of immigration on healthcare coverage and utilization. Significant research reveals that immigrants tend to have less health insurance, less utilization of traditional healthcare providers, and lower quality of care, with higher emergency room and urgent care clinic visitation compared to U.S.-born populations. Additionally, deterioration of health and more healthcare needs over time among immigrants may be related to adopting traditional Western diets and sedentary lifestyles (Carter, R., Dr., 2015).
To ensure effective communication of risk and protective factors, KCHD considers health issues and needs common to one's homeland, socioeconomic background, immigration status (i.e., refugee, documented, undocumented), English proficiency, residential location and marginalization when surveying and addressing the impact of immigration or uninsured populations on its public health systems. All communication is delivered in a culturally competent and sensitive manner.

Ideas about health and behaviors are shaped by the communication, information, and technology that people interact with every day. Health communication and health information technology (IT) are central to health care, public health, and the way our society views health. These processes make up the context and the ways KCHD and the public search for, understand, and use health information, significantly impacting their health decisions and actions.

By intentionally combining health IT tools and effective health communication processes, KCHD aims to improve healthcare access, quality and safety; increase the efficiency of healthcare and public health service delivery; improve the public health information infrastructure; support care in the community and at home; facilitate clinical and consumer decision-making; and build health skills and knowledge (Healthy People 2020).

Finally, KCHD uses a broad and diverse assortment of communication tools and approaches to meet the public where they are. Communication is delivered in both a client centered and a population based setting. Tools and approaches include the use of public outreach via face-to-face contacts at local events and community gatherings; through the use of science-based, easy to comprehend and thoughtfully prepared written educative materials; mainstream and social media tools and opportunities; a multilingual and easy to navigate website; electronic newsletter, and easy to use info-graphics and informatics. KCHD routinely performs and shares public health surveillance on existing and emerging topics in an effort to keep its community informed and empowered with cutting edge public health knowledge (See appendix for larger map).
COMMUNITY COMMUNICATION GOAL UPDATE
The Kendall County Health Department will employ methods of community communication that considers a thoughtful presence and responsiveness.

- Communicating access to services will continue to diversify; ranging from pushing out more sensitive health information to the public on Facebook from partnering with the treasurer’s office to make service information available to the community.
- Individual/Family Needs will be addressed with special engagement efforts being made to local libraries and multi-family housing.
- Migration challenges trends such as needy families entering or elders exiting the area will receive thoughtful response.
- Serving community will be communicated through newsletters being sent to local churches and schools.
- Act attentively to socioeconomic wellbeing issues by providing service information to local resale shops.

COMMUNITY COMMUNICATION GOAL AND UPDATE
The health department strategic planning process opened with very robust dialogue on community communication related to programs and services, significant strides have been taken towards creating processes that support focused and simplified community communication:

Flyer Messaging; Programmatic flyers are developed through an efficient process that ensures a clear, crisp, and aesthetically considerate message to the community reader. These are formatted for population-based electronic dissemination or in print for person-based community engagement.

Infographics and Informatics; Infographic preparation for focused numeric presentation and informatics for focused narrative presentation have allowed us to communicate complex health & wellbeing issues to our community on one page presentations. This will continue to be fundamental to our reporting of health progress and wellbeing surveillance in our community.

Newsletter Development; The development of a quarterly organizational newsletter has allowed us to offer regular communication about just a few programs & services in messaging that considerately invites the reader to learn more. These are also formatted for population-based electronic dissemination or in print for person-based community engagement.

Website Update; Our website and web developing process has been completely redesigned as a sustainable system of both simple and sophisticated communication. The current website offers diverse audiences the ability to access contact information, program information, health data, health news, and journal/reports.

These community communications are continuously developed to be responsive to creating access to health & wellbeing information, individual & family needs, community diversity, churches & schools, and socioeconomic matters of duress that might require additional access considerations.
FUND DIVERSIFICATION

The ability of local government public health departments to provide core public health services depends in large part on the receipt of a reliable stream of revenue from the federal government, state government and local government. As a result of the Great Recession, this flow of revenue has been disrupted and declined over the past three years (Reschovsky and Zahner, 2016). Further, since state and local governments tend to recover from budget crises more slowly than other sectors, public health funding from state and local sources seem unlikely to quickly return to their pre-recession levels (Meit et al., 2013).

The chart below displays how the County’s share (8.6%) of tax dollars are dispersed to the various funds and organizations.

(Reschovsky and Zahner, 2016)

HEALTH DEPARTMENT
GRANTS/REVENUE DIVERSIFICATION

In order to survive potential disruption of revenue, the Kendall County Health Department engaged in meticulous cost saving techniques to ensure continued financial solvency. This solvency was attained by conservative budgeting, financial discernment, rigorous attrition, and diversifying funding streams. As local government should, the health department is constantly seeking new revenue streams in order to reduce the burden of the community needs on local tax dollars.

While local health departments have limited control over the amount of revenues they receive from federal, state and local governments, they can influence revenues from private pay, private grants and foundations (Reschovsky and Zahner, 2016). During 2016, the Health Department drove deeper into the private insurance landscape not only to ensure increased access to health care for residents, but to capture financial reimbursement of activities that already occur. By contracting with several insurance companies, the health department is able to regain a small percentage of reimbursement for services rendered. (See appendix for larger versions of charts)
Establishing financial sustainability should be viewed by nonprofits as a dynamic and continual process (Padilla et al., 2012). Throughout the past five years, the Board of Health cautiously instigated skillful financial planning in order to aid our community when tough times prevail or a public health emergency arises. These solvency efforts have fruitfully produced a responsible health department operational reserve. An *operational reserve* is a fund balance set aside to stabilize a nonprofit’s finances by providing a cushion against unexpected events, loss of income and large unbudgeted expenses (Nonprofits Assistance Fund, 2014). This reserve is monitored each month and is drawn upon to balance our expenses as needed. Based on projections of risks, it is a health department priority to maintain a reserve that reflects a minimum of six-month operational reserve.

That said; as the county population grows, the health department has learned to maximize the limited resources available for funding public health services. Within these limitations is where creative strategies for funding are coming into play. The department continues to explore alternative funding mechanisms, obtain reimbursements for services and/or activities, and strategize ways to “manage” the state budget crisis, all while we articulate the value of public health services to our local residents and decision-makers (See appendix for larger version of chart).

The Board of Health has developed the following strategic priority and related objectives:

Continue to streamline fund diversification for the sustainability of community work.

- Continue to be a provider of accessible and affordable services across county sectors.
- Focus on financial sustainability that gives consideration beyond the twelve months of a fiscal cycle.
- Use fiscal communication that is clear, concise, and appropriate for the respective audience.
- Deepen understanding of the insurance landscape in order to enhance modest claims through public-private partnership.
- Continue to maintain healthy reserve preservation in order to create continuity of vital programs and services to the community.
Fund Diversification Goal Update

Continue to streamline fund diversification for the sustainability of community work.

- Continue to be a provider of accessible and affordable services across county sectors.
- Focus on financial sustainability that gives consideration beyond the twelve months of a fiscal cycle.
- Use fiscal communication that is clear, concise, and appropriate for the respective audience.
- Deepen understanding of the insurance landscape in order to enhance modest claims through public-private partnership.
- Continue to maintain a healthy reserve preservation in order to create continuity of vital programs and services to the community.

Each year the Health Department is provided opportunities for growth and development in the area of fund diversification. 2019 was no different. Operational efficiency increased by working to improve accuracy and timeliness of financial reporting both internally and externally. The solicitation of new and diverse private partnerships continues to contribute to the sustainability of community work.

Billing Software; After a year of research in 2018, we configured and trained staff to utilize the billing module in an existing electronic relational data system. This billing module allows for more efficiency, timeliness, accountability and above all, accuracy throughout our billing procedures. Implementation of this system will begin the first week of January 2020.

Insurance Landscape; Through increased knowledge production and steady workforce development, our insurance billing landscape has continued to mature. Accurate coding and timely filing have been key in obtaining modest reimbursements. The electronic relational data system allows for paperless billing which eliminates redundancy, is cost-effective, and leads to accuracy in charts and reporting.

Private Partnerships; With purposeful engagement, in 2019 the Health Department partnered with two new private agencies. One partnership challenged us to work with the elderly and disabled population to reduce energy consumption which in turn, created improved comfort and financial health. The second agency solicited the Health Department to assist in providing mental health consultation to the caregivers of children in childcare settings. Collaborating with private partners enables us to deliver tailored programs through diverse funding streams.

Monthly Fiscal Monitoring; To ensure proper and transparent stewardship of federal, state and local monies, each month program activity reports and financial statements are reviewed for accuracy and reasonableness. All Health Department vouchers are reviewed and approved each month by the Finance Committee, as well as, the Board of Health.

Sustainable funding is critical to community work. These four strategies of fund diversification are a priority as we budget, plan and prepare for the future. As we experience an increased demand for services, we are also faced with increased competition for funding. That said, the Health Department must recognize the need for internal and external growth and create successful strategies to reach those goals. Systems improvement and partnership development are an integral part of our fiscal plan.
STAKEHOLDER INTERRELATEDNESS

Strategic planning processes can be used as a way to share organizational vision with stakeholders. Both narrative and numeric description can serve to integrate a more fully framed picture of the organization in service. “We conclude that a combination of technical and relational design can effectively help a fragmented group of actors to find a shared and meaningful story” (University of Minnesota, 2017). Ensuring effective iterations between technical and relational design requires institutionalized and participant capacity for such a mindset. Planning can also serve as a communication model that fosters dialogue, creativity, and an inclusive shared story about the future.

The National Education Association (2011) has identified ten major strategic approaches to partner and stakeholder engagement in order to enhance organizational success. Although these strategies were developed for the public school system, a paraphrased examination of these strategies reveals critical relevance to health and human services work:

- **Strategy #1 – Vision and values**: Taking time to think deeply and reflect about what participants believe, and why they think efforts are critical.
- **Strategy #2 - Reflecting community**: Identifying priorities and developing a plan that creates consensus around what needs to happen.
- **Strategy #3 - Using data to set strategies**: Looking closely at current trends and addressing areas of weakness.
- **Strategy #4 - Professional development**: Organizational learning should be informed through data and stakeholder aspirations/needs.
- **Strategy #5 - Collaborations with partners**: Pulling in strategic partners such as colleges, social service, health agencies, community groups, faith-based organizations, local leaders, public officials, and local businesses can improve strategic initiatives.
- **Strategy #6 - Targeted outreach**: Identifying groups that need special attention, learning about their concerns and needs, and responding in culturally appropriate ways.
- **Strategy #7 - One-to-one engagement**: Taking time to have conversations on how best to collaborate.
- **Strategy #8 - High expectations**: Making it clear that success is the expectation and supporting success is critical.
- **Strategy #9 - Cultural competence**: Professionals must act as a bridge to any barriers of culture, class, or language.
- **Strategy #10 - Connecting to the community**: Making efforts relevant to community lives while showing service to the community.

It should be noted that these strategies affirm as well as inspire Health Department’s efforts on inclusive mission values statements development, data and surveillance, partner collaboration, one-on-one engagement, and cultural competence.

Successful long-term planning depends on having a clear picture of mission and vision that includes an understanding of your partnership structure and strategic priorities. Creating an understanding of what sustainability means to an organization’s work should be shared with key partners and key stakeholders in order to make planning for sustainability easier. “Consider expanding your definition around sustainability to include the efforts of like-minded partners and organizations; it may be work that they are already doing, (Centers for Disease Control, 2016).
Not only should organizations have a clear picture of their mission and values, but it is also important for organizational leadership to understand that there will be stakeholders that do not value the mission of the organization. Stakeholder opposition to the mission to serve community may be overt or covert. “Instead of putting out fires through reactive damage control, we recommend that managers ought to utilize the *stakeholder view* approach and the concept of interrelatedness (Center for Strategic Management Stakeholder View, 2003).” The practical dilemmas of having an *agent provocateur* or a stakeholder whose main effect is that of value destruction may be used for initiating innovative ideas that actually support the mission of the organization. In taking the stakeholder view approach, be sure to consider the perspective of key stakeholders as worthwhile to the work of the organization. This approach allows for a more proactive resolution of crises by taking into consideration all stakeholder relationships, and not just the most urgent or powerful ones.

A roundtable approach serves to bring together stakeholders who are actively involved in working with populations that are underrepresented in demographic data. A collaborative dialogue should serve to consider all community populations, especially when they do not possess community status. In addition, a roundtable can identify health disparities that may be present in the community (National Human Genome Research Institute National Institutes of Health, 2015). The purpose of identifying health disparities is to bring primary stakeholders with diminished access to quality health and wellbeing status to center.

Stakeholders should also be understood as often embedded in networks as well as having discrete qualities. This perspective offers a better understanding of stakeholder networks where value exchange has become complex rather than dyadic. Capabilities required by organization dealing with complex stakeholder scenarios include systems thinking, paradoxical thinking, and democratic thinking (Journal of the Academy of Marketing Science, 2015). Systems thinking requires reflection on inputs, transformations, outputs, feedback loops, goals, stakeholders, and external influences that operate together to make an organization healthy or unhealthy. Paradoxical thinking can be utilized as a way of preparing for troubles by cognitively going through the motions of facing the trouble or aversive reality. Democratic thinking requires governance in collective decision making, by which decisions are made by the group and are binding for the organization.

The Centers for disease control identifies potential stakeholders of public health (2016). Potential stakeholders in public health programs may include:

- Program managers and staff
- Local, state, and regional coalitions interested in the public health issue
- Local grantees of your funds
- Local and national advocacy partners
- Other funding agencies, such as national and state governments
- State or local health departments and health commissioners
- State education agencies, schools, and other educational groups
- Universities and educational institutions
- Local government, state legislators, and state governors
- Privately owned businesses and business associations
- Health care systems and the medical community
- Religious organizations
- Community organizations
- Private Citizens
- Program critics
- Representatives of populations disproportionately affected by the problem
- Local law enforcement
This list of potential stakeholders may be further analyzed by categorizing the kind of stakeholder representation constituted. The University of Kansas offers some complimentary insight (2016). Primary Stakeholders are those intended to benefit from the services provided. Secondary Stakeholders are those responsible to provide services for the primary stakeholders or those who have jobs/lives that may be affected by the work. Finally, Key Stakeholders are government officials or those who have influence. This thoughtful taxonomy helps the organization place the ethos of focus in respective order and balance.

Not only should stakeholders be identified, but stakeholder interests should also be identified. Furthermore, analyzing the interest of stakeholders can serve to strengthen an organization in several ways:

- It puts more ideas on the table
- It includes varied perspectives from all sectors
- It gains buy-in and support for the effort from all stakeholders
- It demonstrates organizational fairness to everyone.
- It saves organization from being blindsided
- It strengthens organizational position if there is opposition
- It creates bridging social capital for the community
- It increases the credibility of organization
- It increases the chances of organizational success

Some of the richest insights provided by external stakeholders may be gathered through interviews. This can be especially impactful as applied to Primary Stakeholders. Built into this engagement approach, is the anticipation that feedback gathered from the interview process will inform and shape strategic approach. This model of engagement is labor intensive and requires a high level of organizational competence. The fruits of such labor may include; building trust among its stakeholders, vastly improving customer service, adopting new risk management approaches, and cultivating innovation (Calipers, 2016). Interviewing techniques offers potent possibilities for Primary Stakeholder engagement. Roundtable techniques offer potent possibilities for Secondary Stakeholder engagement. Group or one-on-one engagement both offer possibilities for Key Stakeholder engagement and should be carefully discerned in advance. The perspective of each category of stakeholder is considered and revered by a learning organization.

Regardless of which category of stakeholder being engaged, considerate communication is paramount. The Strategic Communications Toolkit sets forth several benefits of such communication (The Office of Adolescent Health, 2016):

- Increase the intended audience’s knowledge and awareness of an issue
- Influence perceptions, beliefs, and attitudes that impact community
- Prompt action of others around an issue
- Demonstrate or illustrate skills
- Reinforce accurate knowledge, attitudes, or behavior
- Show the benefit of behavior change
- Advocate a position on an issue or policy
- Increase support for a program
- Refute myths and misconceptions
- Strengthen organizational relationships
STAKEHOLDER INTERRELATEDNESS GOAL UPDATE
Act with leadership on all matters of stakeholder interrelatedness.

- Community Health Planning will be informed by grant requirements and especially inspired by client/community needs.
- Participation in community health plan update will include day care and local library partners.
- New initiative of engagement will include homeless youth, local preschools, private schools, senior citizens, and war veterans.
- Increased program impact will be asserted by including Salvation Army and youth group leadership perspective on trending issues.
- Public partnerships will include creative resource dissemination.
- Good will outreach is an area of high priority related to key stakeholders.

As we move towards the close of our 2020 Strategic Plan, all objectives have been robustly addressed throughout the implementation years of this plan and there are there are also four very challenging relational areas of stakeholder interrelatedness that are most salient to our community work in the areas of:

Colleges and Schools; Critical partnerships of duration and leadership are manifested in health department Advisory Board, Board of Health, Research Collaborations, University Internships, and much needed Youth Prevention work.

Criminal Justice; Initiatives include the collaborative development of our Crisis-to-Treatment Approach, Drug Court, Police Training, Jail Treatment Office, Mental Health First Aid Education, MH Court Exploration, PD Clinical Office/Space, Police Crisis Intervention Team, Thinking for Change, and Violence Prevention work.

Hospital and Impatient; Initiatives include offerings of hospital and impatient access and learning opportunities through Advisory Board, Care Coordination, Community Assessment, Narcan Administration, Resident Rotation Education.

Interagency Collaboration; in addition to the aforementioned inter-agency collaborations, formal and informal partnership engagement aimed at fulfilling community needs have regularly occurred with Faith Based, Funding Authorities, Housing Providers, Senior Providers, and Veteran’s Services.

These salient areas of initiative have thoughtfully addressed community need, inclusive community planning, key partner engagement, education & resource dissemination, youth prevention & supports, as well as good will in our every endeavor.
**WORKFORCE DEVELOPMENT**

Workforce development enhances an organization’s stability by focusing on people as practitioners and as part of a learning organization. When practitioners are poised for change, learning, and community impact, the organization is most likely to sustain quality practices. Public service workers that participate in their own professional development; through their work, contribute to career sustainability.

Health and human service organizations have had a long-standing history of contact with the community served, yet engaging those served as partner can offer community members and workforce members great benefit.

Partnering with persons served represents a standard of quality that enhances the knowledge and perspective of the person served as well as the knowledge and perspective of the serving professional (Australian Commission on Safety and Quality in Healthcare, 2011). Members of the workforce using methods of engagement to partner with community consumers, are practicing organizational leadership and learning.

Organizational learning and professional development requires continuous attention. The workforce continuously needs to be up to date by expanding (Centers for Disease Control and Prevention, 2013):

- Training in informatics, collaborative leadership, businesses practices, community engagement, and marketing/communication
- Cross training, which is critical because of increasing rates of job mobility
- Population health content in professional curricula
- Content about the changing health system and the role of the worker
- Career pathways that utilizes varying skill sets

This can be readily accomplished through the circulation of literature, planned learning at team meetings, and innovative implementation of best practices. The key to success is not to focus on formal training, but rather create an environment that supports rapid on-the-job learning (Forbes, 2012). Such learning experiences that are reasonable in expectation and relevant to the adult learner are likely to bear the most fruit.

The infusion of digital information into the understanding of data tends is essential for the contemporary professional workforce. A national informatics competencies working group articulated the informatics competencies necessary all workers (United States Department of Health and Human Services, 2009):

- Use of information in practices
- Use of information technology to improve practices
- Management of information technology processes to improve efficacy of practice

Integrating informatics with scientific synthesis of data requires an orientation to research methods related to both narrative and numeric data sets.

Performance management involves a process of goal setting, continuous progress review, and feedback loops to improved performance. These essential components of performance management have more traditionally been applied to the review of worker performance. While this continues to be the case, these basic principals are now being applied to complex project performance. A well-developed performance management plan is an essential management tool for high-performing organizations (Society for Human Resource Management, 2016).
The utilization of informatics, information technology, and performance management come together naturally through the implementation of a full service electronic records system. The electronic record system is a documentation tool that yields data useful in enhancing services, evaluating quality, maximizing efficiency, and measuring need (The Online Journal of Issues in Nursing, 2015). An electronic record system refers to the systematized collection of individual/entity and demographic/population electronically-stored information in a digital format. This information can be secured for privacy, transmitted with consent, and studied in aggregate. The magnitude of harnessing this potential for systems improvement can be intimidating and overwhelming to even the most dedicated professional. Yet a learning organization is able to devise approaches to such complexity and make informed decisions as part of a commitment to quality.

Creating a positive climate for learning greatly enhances professional development. Supportive learning environments allow time for a pause in the action and encourage thoughtful review of processes (Harvard business Review, 2008). A learning environment is nurtured through the circulation of literature, planned learning at team meetings, as well as through related serendipitous dialogue. A culturally competent and deeply respectful work environment strengthens career sustainability. Respect and appreciation for each other make the whole stronger than its individual parts. Each individual staff person should be encouraged to understand how he/she contributes to the whole and each staff person should be encouraged to learn how others contribute (The Seven Components of Organizational Sustainability, 2009).

Linking workers to the vision and mission of the organization may support recruitment and retention. Decisions to begin and continue working for employers are intricately tied to individuals’ feelings regarding the nature of their work (Council on Linkages Between Academia and Public Health Practice, 2016). The Health Department governance has taken a supportive policy position of creating a mission and vision that clearly communicates the purpose and nature of organizational work.

♦ Board of Health Mission Statement
The mission of the Kendall County Health Department is to promote physical health, mental health, environmental health, protect the community’s health, prevent disease, and promote family economic self-sufficiency through both person based services and population based programs.
• Provide both person based services & population based programs; Our health department takes great care to provide both person-based as well as population-based health and well being programs for our communities. Our diverse person-based services such as home weatherization, addictions treatment, and person centered nutrition consultation are vital to the wellness of the communities we serve. Our population-based services such as radon education, energy conservation education, suicide surveillance (trend monitoring), communicable disease prevention, and emergency preparedness work are vital to the wellness of the communities we serve. As a provider of both person-based as well as population-based health and well being services, we are poised to use such breadth of understanding to employ effective prevention information, interventions, and strategies on behalf of community wellness.
Support family economic self-sufficiency; all families and individuals want to maintain financial well being, remain free of socioeconomic duress, and protect themselves from the debilitating effects of poverty. Overcoming poverty and chronic unemployment is crucial to family well being. Holistic programs that simultaneously address skills alongside household supports are more likely to have success in helping families achieve self-sufficiency.

- Implement an ongoing program of assessment of needs and resources, develop policies to encourage better health, and assure that needed services are available.
- Promote health by providing educational programs in physical, mental and environmental health, alcohol/drug abuse, tobacco control, and injury and violence prevention, etc.
- Develop and disseminate materials and programs to educate and inspire residents about healthy behaviors and healthy living.
- Protect public health by providing immunizations and investigating communicable disease.
- Assure community health by monitoring drinking water, inspecting food establishments and food handling, and monitoring the storage and disposal of wastes.
- Provide outpatient mental health and chemical dependency services to county residents of all ages.
- Improve access to care by utilizing the services of the private health sector and by providing services to those with limited resources.
- Prepare the community for human initiated & natural hazards via emergency preparedness planning.

**BOARD OF HEALTH VISION STATEMENT**
The Kendall County Board of Health is dedicated to promoting the health and well-being of the people in our community.

Not only is a climate for continuous learning and relatedness to organizational mission important for workforce development, but there is also evidence that the nature of an employee’s personal commitment is also significant. Having a personal commitment to public service is significantly related to governmental employees’ decisions to remain with a current organization, although this may not be as significant a factor in the initial decision to take a public service job (Journal of Public Health Practice, 2016). A public organization with a mission to serve people with government employees that are committed to serving that mission, make for an impactful and precious community asset.

The Kendall County Health Department thoughtfully puts forth the following organizational priority and related objectives:

Workforce Development will be informed by performance management, a readiness for change, and an appreciative perspective on learning organization.

- Continue to apply accreditation, national standards, and quality standards to our work.
- Use data trends, surveillance information, and electronic record informatics to inform responsiveness.
- Continue to examine what grant/resources are needed for program expansion, staff sustainability, and place-based services.
Workforce Development Goal Update

Staff participate in a Workforce Development Gap Analysis. In 2019, staff referenced the publication, Council on Linkages Core Competencies, listing the most salient competencies and knowledge needed by our organization. These competencies were ranked numerically to reveal any gaps believed to exist. Our Leadership Team then strategized and implemented workforce development opportunities intended to address these gaps. In 2019, these opportunities included our ability to recognize the many contributions of diverse perspectives, and the areas of Community Engagement; Information Technology; Synthesizing Research; Validity and Reliability; and Writing with Precision.

The Programs Administrator, in a Performance Management/Quality Improvement Team meeting led division directors in a discussion on the many ways in which we routinely further our workforce competency by recognizing contributions of diverse perspectives. Directors then shared with their respective staff the following resulting list: Engaging the public, community partners and persons served on our advisory boards and our Community Health Assessment (CHA) committee; Canvassing our community performing ethnographic interviews of individuals unable to be with us at our table; Administering a deductive consumer insight instrument; Administering post-treatment surveys; Posting on social media and website, invitations for feedback from the public; and in our day-to-day serendipitous discussions with clients and partners.

As the assessment phases of the 2021-2026 Mobilizing for Action through Planning and Partnerships (MAPP) process begins, the Health Department has been and continues to be in contact with diverse community stakeholders to ask for their participation in the robust dialogue surrounding our upcoming Community Health Plan. These participatory community engagement efforts are vital to the ownership and leadership of public health activities in Kendall County.

Community Action Services explored the use of technology to streamline the process of entering client data in our relational electronic records system (ERS). Community Action already enters all their client data into a system required by the state. To then put the same data into our ERS would add more time consumption to employee work capacity. Staff came up with a way to import client data reports from one system to another and this will be done by staff on a monthly basis. This method will prevent staff from having to enter the client data twice. Additionally, this exercise served to help Community Action further understanding the structure and use of this integrated relational electronic record system.

Mental Health Services dedicated time to critically analyze, describe, and synthesize relevant health and wellbeing research from the literature. Led by the unit’s Program Director, staff discussed the research article, A paradigm shift: relationships in trauma-informed mental health services (BJ Psych Advances, 2018). Staff critically read and analyzed the article, focusing on research based recommendations; and worked to synthesize the research, discussing ways to identify through assessment and treat during the clinical counseling process, trauma experiences. In a second training, staff read Recommended Standard of Care for People with Suicide Risk: Inpatient Care to Outpatient Care (National Action Alliance for Suicide Prevention, 2019). Again, the team discussed ways to synthesize and describe the research as it applies to our work. This led to implementation of standardized suicide assessment for at risk individuals and effective safety planning.

The Executive Director, in a Systems Improvement meeting with division directors and administrative staff, shared and facilitated points of discussion on Reliability and Validity as they pertain to research.
Categories discussed included Operational Definitions of Reliability, Operational Definitions of Validity, and Reflecting upon Implications for Methodological Design.

Environmental Health Services touched on the topic of writing with precision. To address this important communication skill, the division’s director researched the subject and provided his staff with a presentation titled *Writing with Precision*. The director followed up this presentation with individual staff meetings to review and discuss writing examples; and to share web-based writing skills resources offered by the National Institutes of Health.

At our All Staff meetings, staff both deliver and are privy to a broad and diverse array of educative presentations that serve to promote our workforce development. In 2019, staff learned about the importance of and ways in which to address our own self-care. Staff learned of local grassroots efforts undertaken to prevent firearm injury and death; traffic safety, and the prevention of trips, slips and falls. Staff was engaged in a dialogue on suicide, and received an overview of the significant role played by our many community partnerships.

The health department strategic planning process wisely revealed the critical importance of addressing many facets of workforce development. Collectively, these efforts served to foster staff and partners alike as part of a culturally competent and deeply respectful learning organization, each individual understanding how he/she contributes to the whole while at the same time recognizing how others contribute; all were provided with the opportunity to participate in the development of quality-focused informed decision-making. These facets included but were never limited to:

1. **Workforce Development informed by performance management, a readiness for change, and an appreciative perspective on the learning organization:** Through routine dialogue and leading by example our staff have embraced the importance of adaptability, an essential skill given the fluid and dynamic environment in which we work. The continuous need to adapt served to further inspire our culture of knowledge production/consumption as a hands-on learning organization. Staff has played a key role in developing and implementing an outcome model; implementing accreditation standards and preparing for accreditation site visits; reviewing and analyzing the results of consumer insights instruments; presenting program updates, and more. Staff have an appreciation for fully understanding, mastering and improving their craft, and the opportunities that exist to expand their knowledge, not the least of which was participating in the implementation of a worker knowledge GAP analysis and resulting skills building exercises.

2. **Application of accreditation and quality standards to our work:** Our accreditation standards have served as an essential performance management tool routinely referenced by division directors to promote and maintain continuous quality assurance. Our accreditation standards also serve to inform our approach to outcome management and overall accountability.

3. **Using data trends, surveillance information, and electronic record informatics to inform response:** We have leveraged data captured from our service utilization reports, outcome model results, client insights instrument, situational assessment, Mobilizing Action through Planning and Partnerships (MAPP) assessments, and Geographic Information System (GIS) work to help inform and shape our program selection, design and implementation. We have endeavored to triangulate data from diverse sources and in a variety of forms such as numerical and narrative, and primary and secondary.
4. **Examining what grants and resources are needed for program expansion, staff sustainability, and place-based services;** We have been diligent in exploring for and assessing opportunities intended to promote program expansion and staff sustainability. We have examined hundreds of public and private funding opportunities, securing few though writing for many. By routinely scanning our environment, and communicating with our community, community partners, stakeholders and governance we’ve ascertained where our programs and services are most needed, and have met those needs when feasible. We have also taken this opportunity to train on and expand our use of our electronic medical records and billing software.

Our attention to and appreciation for the many facets of workforce development has always been and will always be an integral part of our organization’s fabric.
<table>
<thead>
<tr>
<th>PRIORITY TITLE</th>
<th>MEASURABLE OUTCOME</th>
<th>EVIDENCE OF OUTCOME</th>
<th>ACTUAL OUTCOME</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community population opportunities for access to oral health care</td>
<td>A dental clinic – free of charge - for adults without dental insurance will be operational by 2020</td>
<td>Presence of a dental clinic – free of charge - for adults without dental insurance</td>
<td>Four local dentists, two dental hygienists, the needed dental equipment &amp; ample clinic space have been secured.</td>
</tr>
<tr>
<td>Community population potential exposure to Lyme Disease</td>
<td>Annually, at least 50% of residents receiving awareness education will express commitment to practicing protective factors that reduce exposure to Lyme Disease</td>
<td>Report of aggregate results of a binary survey</td>
<td>90% of people surveyed after receiving education answered that they were more likely to practice preventative behaviors to reduce their exposure to Lyme Disease.</td>
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<td>Seniors access to assets that reduce socio-economic duress &amp; support mental health</td>
<td>By 2020, mental health &amp; socio-economic supports facilitated for seniors age 60 &amp; above will be increased by 10%</td>
<td>Report (Awards Electronic Medical Record &amp; STARS Database) the percentage increase of seniors receiving socio-economic &amp; mental health supports at KCHD.</td>
<td>In 2019, the percent increase in seniors receiving socio-economic and mental health supports was 56% and 11%, respectively.</td>
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<td>Increase energy conservation among clients through education and raised awareness</td>
<td>Clients receiving energy counseling will demonstrate an annual decrease in energy usage of at least 5%</td>
<td>Client intake forms and interviews, energy bills, STARS</td>
<td>Clients receiving energy counseling demonstrated an annual decrease in therms used, of 13%; and an increase in kilowatts of 33% likely due to historical cold weather events</td>
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<td>Increase seniors’ experience of family support and connectedness</td>
<td>Seniors will experience a 10% increase in their reported family support and connectedness</td>
<td>Client insight instrument</td>
<td>Seniors receiving comprehensive care coordination services experienced a 12% increase in their reported family support and connectedness.</td>
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<td>Create/implement efficiencies to the implementation of the Non-Community Water Supply Program</td>
<td>100% of Non-Community Water Supply Program Sanitary Surveys will be completed within required timeframes</td>
<td>Program Performance Tracker (Excel) and IDPH Portal Reporting System</td>
<td>100% of Non-Community Water Supply Program Sanitary Surveys completed within required timeframes.</td>
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<td>Increase the number of successfully completed Home Visits for &quot;At Risk&quot; infants enrolled in Family Case Management.</td>
<td>A minimum of 75% of At Risk infants will receive a Home Visit promoting a safe and healthy home environment.</td>
<td>IDHS quarterly performance reports and FCM performance tracker (Excel).</td>
<td>82% of At Risk infants received a Home Visit promoting a safe and healthy home environment.</td>
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<td>BOARD INITIATIVES</td>
<td>STRATEGIC INITIATIVES</td>
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<td><strong>Accessibility to community information/informatics</strong></td>
<td>Will annually review &amp; update department website through 2020</td>
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<td><strong>Measureable Outcome</strong></td>
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<td></td>
<td>Will annually review &amp; update department website through 2020</td>
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<td><strong>Evidence of Outcome</strong></td>
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<td>Up to date website</td>
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<td></td>
<td><strong>Actual Outcome</strong></td>
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<td>The website is updated weekly with relevant information &amp; data sharing to ensure increased, flexible opportunities for knowledge production.</td>
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<td><strong>Community communication &amp; messaging practices</strong></td>
<td>Will reach out to 100% of target categories in 2017</td>
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<td></td>
<td><strong>Measureable Outcome</strong></td>
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<td></td>
<td>Will reach out to 100% of target categories in 2017</td>
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<td></td>
<td><strong>Evidence of Outcome</strong></td>
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<td></td>
<td>Communication/messaging materials</td>
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<td></td>
<td><strong>Actual Outcome</strong></td>
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<td>This goal has been robustly addressed through in each stated objective evidence of 2018 progress is demonstrated in both narrative update in the Strategic Plan as well as measurable data.</td>
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<tr>
<td><strong>Stakeholder interrelatedness &amp; analysis response</strong></td>
<td>Will demonstrate 100% of objectives by 2019</td>
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<td></td>
<td><strong>Measureable Outcome</strong></td>
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<td></td>
<td>Will demonstrate 100% of objectives by 2019</td>
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<td></td>
<td><strong>Evidence of Outcome</strong></td>
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<td></td>
<td>Strategic plan update</td>
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<td></td>
<td><strong>Actual Outcome</strong></td>
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<td>This Strategic Initiative will be reported on in 2020 &amp; the Strategic Plan update indicates we used observable and/or measurable areas of stakeholder interrelatedness work including public/private partnerships &amp; community outreach.</td>
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<td><strong>Fund diversification &amp; sustainability</strong></td>
<td>Will increase fund diversification by 2018</td>
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<td></td>
<td><strong>Measureable Outcome</strong></td>
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<td></td>
<td>Will increase fund diversification by 2018</td>
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<td></td>
<td><strong>Evidence of Outcome</strong></td>
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<td></td>
<td>Organizational financials</td>
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<td></td>
<td><strong>Actual Outcome</strong></td>
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<td>Over 100 Grant opportunities were reviewed in 2018 &amp; several applied for. Two new state funding streams in 2019.</td>
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<td><strong>Workforce development &amp; systems improvement</strong></td>
<td>Will complete 100% of workforce objectives by 2021</td>
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<td></td>
<td><strong>Measureable Outcome</strong></td>
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<td></td>
<td>Will complete 100% of workforce objectives by 2021</td>
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<td></td>
<td><strong>Evidence of Outcome</strong></td>
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<tr>
<td></td>
<td>Workforce development plan</td>
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<td></td>
<td><strong>Actual Outcome</strong></td>
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<td></td>
<td>In 2019, Program Directors applied findings of a Workforce Development Gap Analysis to create and implement an assortment of meaningful workforce development opportunities for staff.</td>
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<td><strong>SOLID WASTE PLAN</strong></td>
<td>Recycle &amp; source reduction</td>
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<td></td>
<td>Will complete 100% of objective by 2020</td>
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<td></td>
<td><strong>Measureable Outcome</strong></td>
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<td></td>
<td>Will complete 100% of objective by 2020</td>
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<td></td>
<td><strong>Evidence of Outcome</strong></td>
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<tr>
<td></td>
<td>Green pages/ outreach materials</td>
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<td></td>
<td><strong>Actual Outcome</strong></td>
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<td></td>
<td>Green Pages are updated regularly. Staff attended the 2019 Illinois Counties Solid Waste Management Conference. Department staff provided leadership for the 2019 conference.</td>
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<td><strong>Community compost education</strong></td>
<td>Will engage 100% of target categories by 2018</td>
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<td></td>
<td><strong>Measureable Outcome</strong></td>
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<td></td>
<td>Will engage 100% of target categories by 2018</td>
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<td></td>
<td><strong>Evidence of Outcome</strong></td>
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<tr>
<td></td>
<td>Educational materials</td>
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<td></td>
<td><strong>Actual Outcome</strong></td>
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<td></td>
<td>100 % of education related targeted categories under Compost Objectives has been engaged.</td>
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<td><strong>Solid waste legislative/policy</strong></td>
<td>Will integrate legislative monitoring in 2017</td>
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<td></td>
<td><strong>Measureable Outcome</strong></td>
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<td></td>
<td>Will integrate legislative monitoring in 2017</td>
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<td></td>
<td><strong>Evidence of Outcome</strong></td>
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<tr>
<td></td>
<td>Legislative policy tracking</td>
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<td></td>
<td><strong>Actual Outcome</strong></td>
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<td>In 2019 we monitored &amp; worked with assigned manufacturing group to continue electronic recycling opt-in plan in Kendall County.</td>
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<td><strong>Waste-to-energy alternatives surveillance</strong></td>
<td>Will present new information on waste-to-energy alternatives by 2020.</td>
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<td></td>
<td><strong>Measureable Outcome</strong></td>
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<td></td>
<td>Will present new information on waste-to-energy alternatives by 2020.</td>
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<td></td>
<td><strong>Evidence of Outcome</strong></td>
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<tr>
<td></td>
<td>Solid waste executive summary</td>
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<td></td>
<td><strong>Actual Outcome</strong></td>
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<td></td>
<td>In 2019 we explored and shared knowledge with community partners on current and future applications of biofuels technology</td>
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INTEGRATED PLANS
The Kendall County Health Department Accessibility Plan is created in consideration of persons served, personnel, and stakeholders. To ensure best practices, the Kendall County Health Department Accessibility Plan may consider accessibility to be inclusive of *architecture, environment, attitudes, finances, employment, communication, and transportation*.

**Architecture**

The health department will create and maintain an atmosphere of openness and equal opportunity which requires a physical environment designed to eliminate potential barriers. Annually, facilities management staff conduct health department inspections for ADA compliance. In the event of a finding, the implementation of necessary corrections will be made and documented.

**External Environment**

The health department works diligently to enhance accessibility to health and wellbeing information and advocacy with particular reference to vulnerable groups and those most in need. Vulnerable groups in society are often most in need of health and social services but may have great difficulty in accessing them. Identifying barriers to access and putting initiatives in place to combat them is central to the work of the health department.

**Attitudes**

The health department views persons served as vital community partners. Health department staff understands the importance of each individual’s diverse needs and the necessity to utilize person-centered thinking when providing culturally competent and culturally equitable assistance.

**Finances**

The health department maintains modest fees for services. These fees are set at or below comparable services of analogous counties. Also, the mental health unit utilizes a sliding fee scale fee structure for all services. To further increase access to care, health department also accepts several types of insurances for most mental health and community health services.

**Employment**

When a position is made available at the health department, the position is advertised internally and when necessary, externally. The hiring procedure follows an ethical and culturally competent and culturally equitable process to ensure that the most qualified candidate is hired.

**Communication**

The health department hosts internal Spanish interpreter availability and access to over 200 other languages through an offsite interpreter translation service. Additional assets to linguistic access at the health department include: translated paperwork, accessing brail, enlarged font, and TTY calls.

**Transportation**
When personal transportation is not available, local resources such as a cab service or Kendall Area Transit (KAT) are available to assist in transportation efforts for consumers of the health department at their expense.

Accessibility Plan Goal: In order to ensure accessible community information and informatics, the health department will maintain an up to date website that will be reviewed annually through the year 2020.

Accessibility Plan Update: Creating easy access for all residents to relevant and meaningful health information remains very important to the Health Department. One vehicle, our website, has been designed to be usable by residents with the widest range of abilities. The website is fluid and ever changing. Alongside current journal articles, upcoming events, and wellness alerts; our website is host to many artifacts that clearly describe the breadth of public health activities in Kendall County. To name a few; every year we display our updated Strategic Plan, Community Action Plan, and a new Annual Report, every quarter we display a fresh Newsletter, and every month we post meeting agendas and minutes. This ongoing update of the website provides a transparent path into the beautiful happenings of the Health Department for all to appreciate.
A serious emergency or disaster can greatly alter the health and environment of the County. Depending on the nature of the impacting disaster, there may be a demand for extra measures to ensure public health. These demands may include, but are not limited to, surveillance and disease investigation; disease control; assurance of safety for food, water and waste disposal; and special needs for critical incident debriefing/crisis intervention.

An Emergency Operations Plan provides a basis for acting in conjunction with local government officials and responders as well as cooperating with private or volunteer organizations to:

- Prevent avoidable disasters and reduce the vulnerability of citizens to any disasters that create a local public health emergency;
- Establish capabilities for protecting citizens from the effects of a local public health emergency;
- Respond effectively to the actual occurrence of disasters; and
- Provide for recovery in the aftermath of any local public health emergency

**PURPOSE**

The Emergency Operations Plan is intended to be a guideline for establishing an effective response to all-hazards public health emergencies. It is designed to effectively coordinate the use of health department and community resources to protect the life, health, and safety of the county’s population should a local public health emergency occur within the County of Kendall. These emergencies may encompass natural, technological failure, or deliberate disaster events which may disrupt normal operations and require a preplanned response to internal and external disasters.

The Health Department Emergency Operations Plan is intended to augment the Kendall County Emergency Operation Plan and serve as part of the Health and Medical Annex to that plan. It is not intended to supplant the County Emergency Operations Plan. To the contrary, the Health Department Emergency Operations Plan will rely heavily on the structure and content of the County Emergency Operations Plan, and will bring to it expertise, resources, and procedures necessary to fulfill its mission of promoting personal health, protecting community health, preventing disease and promoting family self-sufficiency when responding to public health emergencies.

The basic plan has a broad framework and describes the policies and procedures the health department will follow to mitigate, prepare for, respond to, and recover from the effects of an emergency. The situations the health department must consider as well as assumptions made in respect to a large scale emergency response will be highlighted in the Emergency Operations Plan as well as in the functional annexes to the plan. Attachments are included to provide reference and supporting material.

It is not the intent of this plan to attempt to deal with those events that happen on a daily basis which do not cause widespread problems and are handled routinely by the health department. It will, however, attempt to deal with those occurrences that create public health needs and cause suffering to citizens that cannot be alleviated without the assistance of governmental, private, and voluntary sources.

**OBJECTIVES**

The objectives of the Emergency Operations Plan include:

- Provide maximum safety and protection from injury for staff, clients, volunteers, and visitors
- Provide a logical and flexible chain of command to enable maximum use of resources
- Attend promptly and efficiently to all individuals requiring medical attention in an emergency situation
- Maintain and restore essential services as quickly as possible following an emergency incident or disaster
- Protect department property, facilities, and equipment
- Satisfy all applicable regulatory and accreditation requirements
SCOPE

Within the context of this plan, a disaster is any emergency event which overwhelms or threatens to overwhelm the routine capabilities of the health department. This all-hazards Emergency Operations Plan describes an emergency management program designed to respond to natural and man-made disasters, including technological, hazardous materials, and terrorist events. Implementation of this Emergency Operations Plan incorporates the following priorities into its course of action:

• Save lives
• Protect health department property
• Restore operations
• Meet community needs

In so far as it is impossible to write a detailed plan that covers every contingency, it is expected that those charged with implementing this plan will be free to use discretion to mold the response to the situation. This Emergency Operations Plan is intended to be a flexible document and is written with such latitude in mind. It is recognized that changes from the contents of this plan can and will occur due to the unique nature of emergencies. This deviation, using initiative and common sense, is both authorized and encouraged to adapt to the specific emergency and to ensure public safety.
COMMUNITY ACTION PLAN EXECUTIVE SUMMARY

The Community Action Plan includes a community-needs assessment related to family self sufficiency and subsequent program planning for Kendall and Grundy counties. The purpose of this Community Action Plan is to describe the community needs of Kendall and Grundy Counties, build priorities, and describe service delivery strategies. Feedback was gathered from community stakeholders related to socioeconomic duress factors. This feedback will be used to inform and influence the Health Department’s Community Action programmatic work. Feedback, in the form of data, will be used towards increasing stability and socioeconomic well-being for the residents of Kendall and Grundy counties. The Community Action plan provides a glimpse of organizational services as well as the communities it serves. With the many changing needs in our population, we will continue to be dedicated to the socioeconomic wellbeing issues that residents face, while looking for innovative ways to address them. We are committed to working with all area stakeholders; including community clients, partner providers, and community leaders who wish to assure the presence of services for families/individuals under such duress. The plan aims to provide the programs that provide families/individuals with relief and a meaningful contribution towards impacting the community in a positive way. The plan also looks to addressing the root indicators of poverty and to move families/individuals towards a path of increased stability, self-sufficiency, and social well being. The 2017 Community Action Plan was reviewed and approved by the Kendall County Board of Health.

Relevant informatics was often integrated between the Community Action and Community Health plans. A continuing Needs Assessment using surveillance methods as well as survey design have lead to a better understanding of the work that needs to be done when addressing the needs of the community. Some other examples of data sources include: Grundy County Economic Development’s Planner of 2015, Kendall County Economic 2014 Dashboard, Fox Valley United Way 2014 Annual Report, Northeastern Illinois Area Agency on Aging FY2016 Public Information Document, Rush Copley FY 2014, Kendall County Health Department 2014 Annual Report, Grundy County Health Department 2014 Annual Report, Census Bureau 2014, and the 2015 Report on Illinois Poverty.

Findings within the Community Action Plan reflect thematic community concerns related to the accessibility of sufficiently paying work, the need for housing that is affordable to diverse income groups, and the burden of expensive energy/utility costs. The economic and sociological interrelatedness amongst these social wellbeing concerns is striking. These community concerns reflect essentialities of family economic wellbeing and are consequently reflected in the vital Community Action programs made available to these precious communities.
COMMUNITY HEALTH PLAN/IPLAN
In November 2016, the Kendall County Health Department commenced with the implementation of its five year community health plan. The 2016-2021 IPLAN was strategically crafted to provide for the education, motivation, inspiration, and empowerment of the residents and visitors of Kendall County to make healthy lifestyle choices. As is our tradition, this would be achieved by offering our community optimal opportunities for access to health care, while encouraging all to actively pursue and maintain healthy lifestyle choices and social well-being positively contributing to a common good and growing community spirit.

Our 2016-2021 IPLAN embraces three thoughtfully selected priority community health needs. It was with great intentionality that these needs represent health and well-being initiatives unduplicated in our current local public health system, and that they be set apart by innovation from efforts yet established within our community. Originally selected through a participatory community engagement process culminating in community consensus, these three needs embody the World Health Organization definition of health in that they are diverse and reflect community driven health priorities. Our community’s three needs are:
- Increase community population opportunities for access to oral health care
- Decrease community population potential exposure to Lyme Disease
- Connect seniors to assets that reduce socio-economic duress and support mental health

Following is a summation of IPLAN activities and accomplishments fulfilled in 2017, aimed at addressing and creating positive impact on these needs. Much continues to be learned, including opportunities for improving strategy as we move ahead. The ongoing assessment of our IPLAN methods, as always, will ensure that maintaining and increasing efficacy remain our focus over the next year and beyond.

CREASE COMMUNITY POPULATION OPPORTUNITIES FOR ACCESS TO ORAL HEALTH CARE
Community Health Services (CHS) is dedicated to increasing community population opportunities for access to oral health care. Specifically, by 2021, CHS will reach out to 100% of Kendall County dental offices and health centers to inspire and promote engagement in increasing access to oral health care for Kendall County’s uninsured adult population and co-create participatory access to the county’s population, to good oral health. Community Health has approached this goal by aspiring to gain dental partnerships with community dentists and has acquired all supplies needed to create a free dental clinic for adults with no insurance or lacking dental insurance within Kendall County.

CHS also intends to provide at least two educational presentations on good oral dental habits, annually, to school age children. In 2017, CHS developed a dental educational program for 0-6 years of age, known as “Tooth Keepers”. This program has been presented to two daycare centers (200 + families) in 2017, offering education to both children and parents in the targeted group on good dental habits. We are also providing a new mothers bag with dental educational tools (brochures/flyers/ handouts) through the Obstetrics & Gynecology offices within our county and surrounding hospitals. CHS nursing staff will provide fluoride varnishing care as part of the “Tooth Keepers” program, beginning in January of 2018 to children in Kendall County, with the cost covered by most insurances and Medicaid. CHS also participates in the back to school community events or 5-18 year olds at several community schools, both private and public, reaching over 300 children at each event, providing dental and nutritional education.

In 2017, CHS also composed a webpage to provide the community with 24/7 access to information on oral health care and oral hygiene education and support aimed at promoting enrollment in dental insurance and health care. CHS is providing a training course for two bilingual staff members to become certified application counselors(CAC). As a CAC-designated organization, our staff will help individuals seeking insurance to
understand, apply, and enroll for dental and health care coverage through the Marketplace. The CHS staff has assisted an estimated 4 clients a week over the last 6 months (104 total), directing them to both dental and health care access services. CHS will continue to implement both direct client services and population based interventions in an effort to increase community population opportunities for access to dental care.

**Decrease Community Population Potential Exposure to Lyme Disease**

Environmental Health Services is committed to decreasing our local population’s potential exposure to the harmful yet preventable Lyme disease. A cornerstone of our approach is the implementation of a comprehensive public awareness campaign designed to promote protective factors and supporting behaviors as they pertain to decreasing one’s exposure to Lyme-disease-carrying ticks. A thoughtfully crafted survey tool is used to track and gauge effectiveness of our information and its delivery. We endeavor to demonstrate that a minimum of 50% of survey respondents acknowledge and pledge to practice risk prevention behavior upon receiving our informative presentation on Lyme disease. That said, over 2017, 90% of survey respondents indicated that they will practice more exposure-reducing behavior. Environmental Health Services has also set goals to annually visit at least 4 local healthcare clinics and veterinary offices to share educational materials and locally collected data with public health partners; provide a minimum of two community presentations annually on this subject; execute a tick field surveillance and testing program and provide collected tick data to the public on a specially designed website. Over 2017, Environmental Health Services visited 7 local healthcare clinics and one veterinary office, providing brochures and education on Lyme Disease; presented at 5 different public events to various and diverse groups of people, including school aged children, adults and families; successfully ran a tick collection program, collecting 37 deer ticks to be tested in late December, in partnership with University of Massachusetts for the presence of Lyme disease; and built a website with real time tick collection and testing data available to the public on the Kendall County Health Department website. This non-exhaustive list represents our steadfast commitment to the health and well-being of the residents and visitors of our community.

**Connect Seniors to Assets that Reduce Socio-Economic Duress and Support Mental Health**

Community Action Services (CAS) and Mental Health Services (MHS) have joined forces to connect our community’s seniors to assets that reduce socio-economic duress and support mental health. Specifically, by 2021, Community Action Services and Mental Health Services will assess 100% of the seniors utilizing KCHD for these needs as related to mental health and substance abuse, social isolation, and financial instability. CAS and MHS have approached this goal by endeavoring to conduct a minimum of four presentations annually to seniors, at local senior living facilities, senior centers, senior clubs and social gatherings, to raise awareness of and promote access to services which address mental health and substance abuse, social isolation, and financial instability. Also, CAS and MHS will engage a minimum of four local public health system partners annually, including health care providers, staff of senior living facilities and senior centers, to raise awareness of and promote access to services which address mental health and substance abuse, social isolation, and financial instability. Also, CAS and MHS will engage a minimum of four local public health system partners annually, including health care providers, staff of senior living facilities and senior centers, to raise awareness of and promote access to services which address mental health and substance abuse, social isolation, and financial instability. Also, CAS and MHS will leverage the 24/7 accessibility of the internet (to include a webpage and corresponding social media messaging, and KCHD’s electronic newsletter) to prepare, promote and provide a senior-friendly community-wide resource for mental health and financial stability-related information and resources that may be informed in part by local public health system partners.

Moving the needle, CAS conducted 21 presentations to seniors and senior serving community groups in 2017 alone. CAS also played a lead role in forming the Kendall County Interagency Council and a Kendall County Continuum of Care. In 2017, 722 low-income seniors were served by CAS programs and apprised of MHS program information. In 2016, 796 seniors were served by CAS, however CAS in 2017 had to delay serving the LIHEAP program due to state and federal budget issues in 2017. A decrease in seniors being served in 2017 comparatively to 2016 has been expected due to this delay and CAS will continue to monitor data for January 2018 to be included as a comparison for 2017. CAS developed a podcast that will be providing information to the seniors and the entire community.
This podcast, titled Kendall Healthcast, will be available on the KCHD website. Furthermore, CAS partnered with the Kendall County Senior Provider Group to develop a general Kendall County Senior assistance and information webpage.

Concurrently, MHS conducted 5 community presentations to seniors and senior serving groups in 2017. The presentations to seniors were designed to increase access to mental health services and supports and the presentations to senior serving providers were designed to increase awareness of available mental health resources at KCHD. MHS provided mental health services and supports to 231 seniors in 2017, as compared to 228 seniors in 2016. This modest increase is expected to continue to increase over the duration of IPLAN completion, due to community outreach and engagement efforts. MHS looks forward to conducting training for local senior serving partners in April of 2018 on mental health well-being treatment and supports. This is designed to promote an increased awareness of mental health issues that are relevant to our community’s senior population and to increase awareness of KCHD services. Social cohesion and connectedness continues to be promoted through increased emphasis on family involvement in senior counseling initiatives. This will further be supported through a health and wellness event for seniors and their family members in 2018. Furthermore, MHS will promote an activity to engage youth and seniors aimed at promoting cross-generational connectedness, in 2018. This will consist of youth conducting ethnographic interviews of seniors, to learn about and from their life story, and to then share this information in a report format back to seniors and their family members.
Cultural Equity Plan

This cultural equity plan has been set forth in order to respond to the diversity of stakeholders with respect to; age/agedness, ethnicity/race, gender/orientation, language/literacy, mental health, physical ability, socioeconomic status, and spiritual beliefs. Cultural diversity also includes concepts of status, dress/modesty, family traditions, health values, help-seeking behaviors, matters of privacy, personal boundaries and spiritual identity. Efforts to reduce population health disparity is more likely to succeed if it is part of a broader culture of equity. Fostering a culture of equity can have significant benefits for an organization. When an organization values a culture of equity, the staff shares an understanding of equitable care and places high value on its delivery. Similar to a culture of quality, a culture of equity will be essential to the success of quality improvement that seeks to reduce population health disparities.

Partner Participation

Persons served are vital community partners. Such clients often experience community barriers due to educational, linguistic, or socioeconomic disparities. Client input into services may occur in any of the following ways; Effectiveness Insight Instrument, individual service/treatment planning, governance participation, community health assessment, community health planning, strategic planning, or other spontaneously rendered insight. Another way that client participation input into their own services are achieved, is by asking them about the usefulness of services following the rendering of those services. Client centered services are influenced by abilities, culture, needs, strengths, and desires/preferences of the person served.

Community Engagement

Engagement with community groups that reflect community diversity may contribute to an understanding of cultural trends free of a deficit discourse. These community engagement efforts include outreach to community action, environmental health, mental health, and physical health networks, community resource team, community churches, community schools, senior centers, outreach efforts to community members having difficulty accessing services, and enhanced engagement with current clientele of direct services. The health department is committed to utilizing diverse forms of social media in order to access diverse populations, keeping in mind that electronically prepared vehicles of communication are also accessible to those with mobility impairments. Community engagement also occurs through these vehicles of health information:

- Annual Report
- Brochures/Flyers
- Bulletin Board
- Care coordination
- Coalition building
- Community Assessment/Planning
- Community Event
- Educational Materials
- Face Book
- Local Radio
- Local Television
- Movie Trailer
- Newspaper Article
- Oral Communication
- Press Release
- Seminar Series
- Social Marketing
- Twitter Feeds
- Quarterly Newsletter
- Web Site

Interpreter Availability

Internal Spanish interpreter availability will be available through the health department. Translation of additional materials is also available as needed. Other language interpreter availability will be posted for access to any other language interpretation as needed. All forms are verbally explained to clients in order to ensure their understanding. Standard forms will be reviewed for possible translation needs. Additional assets to linguistic access include:

- Accessing brail
- Enlarged font
- Interpretation support
- Translation support
- TTY calls

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2021 Strategic Plan
RECOURIMENT & RETENTION
Professional development related to culture, diversity, and cultural competence is strongly supported. Existing organizational training should carefully embed relevant diversity topics within the training. The intent of embedding cultural competence into training or in developing any training around cultural competence is to promote the ethics and efficacy with regard to serving diverse populations. That is to say that cultural competence will be a part of ongoing training. Assertive efforts will be made to recruit diversity that is representative of cultural competence for leadership positions, management positions, support positions, and direct service positions through both the employment posting and the interview process.

ASSESSING ACCESS
An awareness of organizational diversity will be demonstrated in the personnel report. Culturally competent accessibility will be demonstrated through a culturally competent recruitment process, through professional development opportunities, through sound delivery design, and through an environment that promotes comfort, trust, and cultural relevance. Specific characteristics/barriers of the population served will be reflected in the community health assessment and partnership engagement in order to increase access to health care services. Community members are welcome to contact the health department for educational information about specific health/services access issues.

EQUAL OPPORTUNITY
The Kendall County Health Department (hereafter KCHD) will comply fully with the non-discrimination regulations set forth in relevant State and Federal law and Executive Orders. KCHD has always offered equal opportunities in employment and, by the very nature of its experience, equal services to all the residents of Kendall County. It is the intent of KCHD to provide equality and respect to all individuals in matters of service and employment.

STATEMENT OF COMMITMENT
It is of great benefit to all employees as well as all those we serve to show professional responsibility and commitment towards continuous growth in cultural competence.

HIRING PRACTICES
All persons will have equal opportunity for advancement and promotion

COMPLAINT PROCEDURE
Complaints will be directed to the Executive Director of KCHD who will direct them as necessary to the Board of Health. The complainant will be advised of ensuing steps which will be taken. The Illinois Department of Human Rights brochure is posted in areas of key visibility throughout the health department.

ANNUAL REVIEW
A review of this plan and CLAS Standards will occur annually.

PROFESSIONAL DEVELOPMENT
Professional development opportunities related to cultural competence will continue to be made available to staff. Special emphasis will be placed upon embedding a commitment to cultural competence within the units of the health department. To this end, professional development opportunities will be planned for the following core competency; Ensures that there are strategies for interacting with persons from diverse backgrounds, as a part of unit meeting professional development discussions.
Executive Leadership Succession Plan

The Executive Director position represents a central element of the organization's success. This document outlines the Executive Leadership succession plan for the Kendall County Health Department. This kind of risk management is not only helpful in facilitating a smooth leadership transition, but reflects Kendall County Health Department Executive Leadership Succession policy and commitment to sustaining a high functioning organization. This plan affords the Board of Health a succession process that is consistent with organizational hiring practices and represents ready strategy for the organizational governance to move forward through a succession process. The succession plan has been prepared in order that the Board of Health may ensure the continuity of the position of Executive Director due to the planned or unplanned departure of the Executive Director. The Executive Leadership Succession Plan is also grounded in employment best practices. The Executive Leadership Succession Plan shall be reviewed annually by the Board of Health.

Competency-Based Recommendation

The Board of Health will take into serious consideration the competency-based attributes recommendations as made by the Executive Director. The Board of Health alone, has the authority to interview, select, and hire the best candidate for the position of Executive Director.

Internal Candidates

Openings may be filled by qualified persons from within the department when possible. Preference is given to internal candidates over external candidates when both are equally qualified. However, internal candidates are not guaranteed the positions for which they apply. Job openings and instructions for applying are posted on the official office bulletin board. The department may begin an external search for applicants simultaneously with the job posting. However, no external applicants will be interviewed or hired for four days following the date of posting except in the case of vacancies which must be filled on an emergency basis.

Interviewing Process

The Personnel Committee will screen all applications for qualification requirements. The Personnel Committee will ensure the facilitation of the interview process by the Board of Health. The Board of Health will interview and select the best candidate for the position of Executive Director.

Background/Reference Checks

References should be contacted by membership of the Personnel Committee prior to hiring a new Executive Director. Background checks should be completed by the Executive Assistant at the direction of the Personnel Committee and results reviewed with the Personnel Committee, prior to an offer of employment. Regardless of the nature and extent of the investigation into the applicant’s background, investigations should be uniformly applied to all applicants.

Ethical Standards

Ethical standards shall be the hallmark of health department Executive Leadership. An Ethical Standards and Rights of Persons Served Policy will be reviewed and signed by the final candidate selected for the position of Executive Director. The signed copy will be placed in the employee’s personnel file. Candidates must additionally be able to support board direction through organizational leadership in the following areas:

- Must work to provide considerate communication to community/partners from diverse perspectives
- Must be prepared for potential conflict from partners who do not share a commitment to community services
- Must be on the lookout for potential opportunities to impact/help community/family wellbeing
- Must act effectively and ethically; reflecting upon a duration beyond traditional twelve months planning period, while infusing foresight into long-term sustainability
- Must be courageous and respectful to others, even when treated conversely
Salary Compensation

Compensation reference to market comparator data and functionally comparable educational credentials/positions will be made available for the Board of Health Finance Committee. Salary recommendation shall be based upon educational credentials, market rate, and organizational financial standing. The Finance Committee will make a recommendation to the Board of Health for the new Executive Director Salary.

Nepotism Stance

The employment of a relative of any Board of Health member is prohibited if such employment shall cause the Executive Director to come under the direct supervision of any related Board of Health member. For this purpose a relative is defined as: husband, wife, son, daughter, sister, sister-in-law, brother, brother-in-law, grandson, granddaughter, mother, father, aunt, uncle, niece, nephew, daughter-in-law, son-in-law, mother-in-law, father-in-law, or domestic partner. Employees will not be considered for promotion if such change shall cause the employee to come under the supervision of any related Board of Health member.

Letter of Hire

A letter of hire will be issued by the Board of Health President for the selected Executive Director. Included in this letter will be such information as job title, salary, expected starting date, and other details pertinent to a newly hired employee. A copy of this letter, signed by the Board of Health President and the new Executive Director, will be maintained in the employee’s personnel file.

Personnel File

A Personnel File shall be established for the Executive Director which will contain; ethics statement, evidence of educational credentials, job description, letter of hire, performance appraisals, and training activities. The department tries to balance the need to obtain, use and retain employment information with a concern for each individual’s privacy. To this end, it attempts to maintain only the personnel information that is necessary for the conduct of its business or as required by law.

Performance Appraisal

The Personnel Committee of the Board of Health shall facilitate an annual performance appraisal process along with the Board of Health; with the new Executive Director initially being reviewed by the Board of Health twice within one year, post the Board of Health’s annual self-assessment. The health department has developed an Executive Leadership performance appraisal that aligns with the Board of Health performance appraisal. The Executive Director is evaluated in a broad array of leadership attributes; including Quality/Efficacy, Quality/Efficiency, Quality/Ethics, Policy/Strategic Planning, Risk Management, Agenda Planning/Board Meetings, Board of Health Development, Advisory Board Development, and Executive Leadership Development. All candidates for an Executive Director opening should be considered against these leadership qualities prior to an offer of employment.

Professional Development

The professional development of the organization’s executive leadership shall be supervised and supported by the Board of Health. Although the selected candidate for Executive Director should be fully qualified to act in that capacity upon the application for employment, an Executive Director orientation should be developed for the final candidate. Formal training attended by the organization’s executive leadership shall be maintained in the personnel file. Other professional development activities may include coalition participation, conferences and training, presentations and training, systems improvement, or workforce development activities.
**PERFORMANCE MANAGEMENT PLAN**

*Purpose Statement*

Kendall County Health Department (KCHD) views performance management as vital to the efficacy, efficiency, and ethics of a healthy organizational design. The KCHD Board of Health maintains a Performance Management Policy. The purpose of the Performance Management Plan is to uphold the KCHD Performance Management Policy. Both the performance management policy statement and the Performance Management Plan represent important policy guidance for the health department and are evaluated no less than annually.

The KCHD performance management process is integrated into all programmatic and operational aspects of KCHD. The KCHD performance management system applies to Outcomes Management, Program Evaluation, and Systems Improvement. Progress towards Outcomes Management, Program Evaluation, and Systems Improvement is evaluated and documented annually. Through the development and implementation of quality improvement processes integrated into organizational practices, programs, processes, and interventions, KCHD aspires to maintain a *culture* of continuous quality improvement.

*Performance Management System Operational Definitions*

Performance management activities include a vast array of efforts to improve efficacy and/or efficiency. This culture of improvement takes an interest in diverse kinds of data examination as an effort critical to workforce development within a learning organization. Knowledge production and strategies for action/improvement may be derived from a limitless array of data sources including: grant deliverables, stakeholder insights, and surveillance efforts.

- Program Performance Management/Quality Improvement Team: comprised of program leadership (the Program Administrator, and program directors and their designees), informed in part by all levels of program staff, who work together to identify staff strengths and challenges in the area of core competency of public health professionals.
- Outcomes Management: includes those things we both forecast and measure (i.e., grant deliverables, Outcome Management Model)
- Program Evaluation: includes all those things that are observable, track-able, measurable, and that Unit Directors are actively monitoring (i.e., IPLAN objectives, Consumer Insight Instrument).

*Organizational Structure*

- The Kendall County Health Department’s (KCHD) Program Performance Management/Quality Improvement Team (hereafter referred to as the PM/QI Team or team) is comprised of program leadership (the Program Administrator, and program directors and their designees), informed in part by all levels of program staff, who work together to identify staff strengths and challenges in the area of core competency of public health professionals. Challenges serve to reveal possible staff needs for further growth and development. These needs drive team discussion on the creation and provision of staff training opportunities, which are reflected in the Kendall County Health Department’s annual workforce development training schedule. PM/QI Team meetings serve to provide directors with a forum to share their respective division’s PM/QI-related activities and accomplishments – and serve as an opportunity for program directors to learn from one another’s experiences. Such a cross-organizational communication of information has the ability to promote and further cultivate innovative PM/QI thinking and activities among program staff.
- Staff Support: Each and every KCHD employee serves a role in supporting, maintaining, and furthering the highest degree of KCHD performance. KCHD staff at all levels of the organization support and aspire to a culture of quality.
Resource Allocation: An estimated 50 percent of staff’s time is devoted to one or more aspects of performance management. This translates to an estimated 26 percent of the KCHD budget devoted to performance management. It should be made clear that a principle component of the Kendall County Health Department’s Performance Management System is an understanding that performance management activities are not mutually exclusive from other organizational activities, programs, and services. To this end all performance management activities ultimately serve to improve the health and well-being of our community members by improving the way in which we understand the efficacy, efficiency, and ethics of our work.

**DEVELOPMENT/TRAINING OPPORTUNITIES**

- **Employee Orientation:** KCHD maintains and implements an employee orientation policy. This policy is reviewed annually and revised as necessary. Each KCHD unit maintains and implements an employee orientation checklist, which includes written materials describing the importance of and ways in which KCHD addresses performance management.
- **Online Training:** KCHD makes available to all staff, online trainings addressing the basics and significance of performance management. Online training opportunities are provided by organizations such as Turning Point, and the Illinois Public Health Institute.
- **Advanced Training:** Addressing the subject of performance management, is made available to KCHD staff in the form of literature sharing, educative in-house presentations, professional conferences and workshops, and academic programs. Organizational training opportunities are also available through KCHD partners at the Department of Commerce and Economic Opportunity, Illinois Department of Human Services, the Illinois Department of Public Health, the Illinois Public Health Institute, and Trade Association partners. The Kendall County Health Department has also developed a Professional Seminar Series which offers diverse professional training opportunities; including performance management or quality improvement related topics, to staff as well as community partners.
- **Continuous Learning:** Staff also have many opportunities for continuous learning and professional development through participatory discussions in quality improvement-related educational meetings such as; Systems Improvement Meetings, Directors Meetings, Division Meetings, and All Staff Meetings. Such information is also shared with staff in the form of carefully selected educative materials supplied in Board of Health and advisory board meeting packets. KCHD maintains a modest yet ample budget providing staff with opportunities to attend professional conferences and trainings promoting performance management strategies. KCHD also receives and disseminates to staff and stakeholders, educative journal articles, research findings, and trade association materials.

**PROJECT IDENTIFICATION**

- **Project Identification:** Improvement areas and related project identification occur in consideration of KCHD’s organizational mission, and a desire to ascertain efficacy. Such identifications may result from grant deliverables; revelations of surveillance and trend analysis; emergence of acute public health issues; routine acquisition and analysis of client and community feedback. Additionally, KCHD routinely networks with public health colleagues and consortiums, in part, to discuss and mutually identify best practices.
- **Alignment with Strategic Plan:** Outcomes Management goals and associated progress are highlighted within the Strategic Plan. The Performance Management Plan is an appendix to our Strategic Plan. The Strategic Plan annually receives a comprehensive review, and is fortified with input from: Board of Health members, advisory board members, staff, and clients and community stakeholders.
GOALS & OBJECTIVES

Unit Directors are responsible for establishing, developing attainment strategies for, and evaluating progress on achieving program goals and objectives relating to their respective unit.

- Performance Measure: Performance is measured and demonstrated in a variety of ways, such as but not limited to: the use of time, and expense and revenue monitoring tools; implementation of performance management models such as Results-Oriented Management and Accountability (ROMA), root-cause analysis (i.e., Fishbone Diagrams), logic models, and Strengths-Weaknesses-Opportunities-Threats (SWOT) analysis; client-issued effectiveness insight surveys; staff-issued worker knowledge surveys; staff meeting dialogues; organizational accreditation and program review standards; employee performance appraisals.
- Objective Responsibility: Unit Directors establish and assign staff responsibilities for implementing program objectives.
- Time Frame: All goals and objectives are measured on a predetermined and routine basis, as determined by the corresponding initiative, program or project. Time frames may be monthly, quarterly or annually.
- Objective Activities: Determined by a number of variables such as but not limited to grant deliverables, work plans, etc.
- Prioritization Process: When unrealistic to address concurrently, multiple goals and objectives are prioritized. Priority may be given to potential performance management activities that require attention and analysis in order to ascertain efficacy, or in order to strategically move the organization forward or sustain the organizational mission.

MONITORING APPROACH

- Data Collection: Data is collected in both numeric and narrative forms, and includes information available at the global, national, state and/or local level. Triangulation is applied through the use of a variety of sources and types of data.
- Data Analysis: is performed in an effort to gauge the efficacy of, or need for, a program or intervention; or to draw comparison or provide perspective of risk.
- Reporting Progress: takes on many forms such as but not limited to grant performance reports, presentations to stakeholders, new articles and press releases, live radio and television appearances, website and Face book page postings.

REGULAR COMMUNICATION

KCHD regularly communicates quality improvement activities conducted by KCHD, using a number of communication vehicles.
- Electronic Communication: The KCHD website, and to a lesser extent, Face book, provides KCHD stakeholders with 24/7 access to performance measures and outcomes in the form of documents such as but not limited to KCHD’s IPLAN, Strategic Plan, Annual Report, Board of Health and advisory board meeting minutes.
**Public Communication**: takes place on a regular basis and in a variety of approaches: written and televised information provided in the KCHD lobby, newspaper articles, television and radio appearances, agency Face Book and website postings.

**Governance Minutes**: are shared with staff; posted on our agency website for public access and review.

**Systems Minutes**: are shared with staff and governance in hard copy and/or in discussion during routine meetings.

**Staff Meetings**: occur via one-on-one staff supervision meetings; and routine Unit, All Staff, Systems Improvement, advisory board and Board of Health meetings.

**Review Progress**

**Organizational Self Assessment**: occurs annually at minimum, using tools such as Turning Point’s Performance Management Self-Assessment Tool (2004), used to identify the extent to which KCHD measures up to components of a performance management system.

**Efficacy and Efficiency**: are carefully considered in the routine assessment of Unit budgets, program outcomes, and client and staff insights surveys.

**Consumer Insight**: KCHD applies an assortment of tools and opportunities to solicit valuable input from its clients, visitors, and the community at large. Annually, each unit administers to clients and visitors an Effectiveness Insight Instrument; monthly meetings give stakeholders the opportunity to learn about and comment on programs and services; KCHD’s Face Book page, Twitter account, website and monthly news articles provide the entire community with an opportunity to share helpful insights.

**Reporting Revision**: The results of progress reports and outcome measurements are carefully reviewed to identify the need for revisions or updates to program goals and objectives, and related strategies.

**Regular Communication** occurs via supervisions; and unit, All Staff, Systems Improvement, advisory board and Board of Health meetings.

**Description of Annually Performed Performance Management Practices**

**Annually, each division will prepare and submit to the Program Administrator, a Surveillance Report, complete with analysis.** These reports in part comprise the annual update to our Systems Improvement Plan, referenced and contained within our Strategic Plan. Each report should be no less than one and no more than three pages in length.

Each division is to gather, analyze, and interpret layered data (local, state, national, and/or global data, where available) on a single health and well-being trend in the community. In addition to gaining an understanding of the trend, surveillance analysis and resulting surveillance reports may reflect some or all of the following best practice surveillance analysis components. Epidemiology or description of the problem; Patterns of occurrence (observed and forecasted); Epidemiology of the problem; Vulnerable populations; Risk factors and protective factors; Prevention strategies; Intervention strategies; Efficacy of prevention and intervention strategies.

No later than mid-year, each division director will identify and present a surveillance topic and a related question which they seek to answer. The aforementioned surveillance components may be organized into an outline to work from/plug information into. Although surveillance analysis components need not flow in the order set forth above, nor will all always be applicable, reports, while data-driven, must greatly emphasize analysis and interpretation of layered data.

It is understood that data analysis is more than putting local, state and national data side-by-side, but is the discussion on comparing/contrasting these datasets (of layered data) in an effort to explain their similarities/differences. The final product must be easy to read, clear and concise. A frame of mind to keep: How might these similarities and differences best be explained to our community partners? Additionally, whenever possible, surveillance findings shall be used to inform program development strategy and to reveal opportunity for program quality improvement.
Surveillance reports will be shared with community partners as a presentation to Advisory Board members—whose discussion and feedback will be encouraged; and made available on our website. Surveillance data, where possible, will be used to prepare a community health profile to be posted on our website for easy access by our public and community partners.

- **Annually, the Program Administrator and Division Directors will review and discuss as a group, our organization’s Performance Management Plan (PMP).** The purpose of this review is to ensure ongoing familiarity with, and to provide and share feedback on our efforts to implement, the Plan.

The Program Administrator and Unit Directors (or designee) will review and discuss as a group a performance management self-assessment tool such as Turning Point’s Performance Management Self-Assessment Tool, in an effort to identify the extent to which KCHD has and implements components of a performance management system.

A report is prepared, describing the self-assessment and related findings, including any identified or perceived opportunities to expand or improve upon the department’s role in and approach to performance management. A summary of the report is shared with community partners as a component of the annual update of the Strategic Plan.

- **Annually, and for a period no less than 30 days, each Division shall implement an Effectiveness Insight Instrument (EII).** The EII is an efficacy measurement, done by “experts”, those we serve. It lets us know how things are working; reveals areas for improvement; allows us to recognized and celebrate our achievements—which motivates staff to perform.

The EII contains, for each division, a set of benchmarked questions that allow for trend analysis among/across all four divisions (i.e., by calculating the aggregate mean for all divisions for benchmarked questions #2 and #3; The mean for all aggregate mean for all divisions for question #4 may be performed with the understanding that there are many variables contained within (i.e., differences in services/clients/how services are delivered between the units).
While the Division Directors are concerned with the results of their respective Division, the Program Administrator is also interested in thematic issues (or positive revelations). Division Directors may present on the results of their own division’s EII, while the Program Administrator will present on any crosscutting organizational themes/trends revealed. A score of < 3.5/4 may be cause for concern and inasmuch begs a careful review and consideration.

**Annually, Division Directors, in consultation with the Program Administrator, select an existing or develop a new work process to test and measure in an effort to explore and identify potential work process improvements aimed at achieving targeted outcomes.** Strategies for attaining process improvements, including forecasted outcomes, or targets, are established prior to implementation. Progress on outcomes attainment is routinely monitored, analyzed and documented quarterly using the Outcome Model tracking instrument. This documentation takes the form of both quantitative and narrative data, the latter described as thick description. Thick description may be used to document any adjustments made to original outcome attainment strategies, such adjustments typically driven by midstream identification of new opportunities perceived to be potentially effective at driving the intended process improvements.

At the end the twelve month period, Division Directors prepare a report, the Outcomes Analysis, describing and analyzing their respective outcomes, and the role that their strategies have or may have played. These strategies, if proven to be effective at promoting or achieving a desired outcome, may be considered a best practice to be continued or expanded upon. The Outcomes Analysis is shared with stakeholders as a component of the department’s annual Strategic Plan update, and as a presentation to community partners serving on our Advisory Boards. Community partners are encouraged to participate in discussion and to share any feedback they may have.

**Critical Incidents occurring on KCHD property are addressed, documented and carefully analyzed as they occur. Annually, a report is prepared, devoid of personally identifiable information, summarizing the nature of said incidents, any immediate measures that had been taken to mitigate any risks to personally safety, and steps taken to prevent future like incidents.** This annual report is prepared by the Program Administrator, Director of Mental Health and Psychiatric Services and Administrative Executive, and presented to Administrative and management-level staff. This report serves to inform and confirm best practice in the areas of both risk and performance management.
Risk Management Plan
High functioning organizations engage in a coordinated set of activities designed to control threats to people, property, income, goodwill, and the ability to accomplish strategic goals. The risk management plan has been designed to manage, prevent, and reduce the severity of such loss. Risk control occurs through the avoidance of exposure altogether, reduction of the probability of loss when inherent risk is reasonable, or by reducing the severity of the consequences of potential loss.

Identification and of Potential Exposures
The Kendall County Health Department pays close attention to the identification of and mitigation of risk. This identification of risk position helps to ensure that our organization may cover potential gaps and strengthen risk management. Areas of risk considered may include; contracts & procurement, driving/vehicles, financial management, media/communication, organizational governance, property/facility, service delivery, vulnerable populations, and workforce development. This risk management plan covers identified areas of potential risk and cites actions to mitigate risk. Potential salient exposure for organizations reflecting our size and diversity of services include driving safety, ethical conduct, fiscal sustainability, and hiring practices.

Identification of action on Potential Exposures
Areas of identified organizational risk based upon the examination of organizational trends, include the following four areas of risk improvement opportunity:

Driving Safety – Policy and procedure concerning transportation activities are essential for any organization, as a part of owning vehicles. Even minimal transportation exposures has been considered by establishing a basic transportation policy and protocol. Driver’s license check is addressed in organizational policy and driving safety is addressed in organizational protocol. High quality defensive driving training has also been offered to staff.

Ethics Conduct – Establishing clear expectations on ethical conduct as well as clear expectations that fraud will not be tolerated in the workplace, is critical to organizational risk management. To this end, the Health Department has established a clearly written corporate compliance policy. The Health Department has added fraudulent behavior to the policy that establishes reason for termination up to and including employee dismissal. An Ethical Code of Conduct training has also been developed for Health Department employees.

Fiscal Sustainability - Budget revenues will be supplemented by utilizing a portion of the Health Department organizational reserve to achieve a balanced budget and the sustainability of organization/services. In order to effectively mitigate risk in funding shortfalls, a number of operational areas will be examined with care. Value-based attrition opportunities are thoughtfully considered with every position opening in order to produce efficiency and refresh efficacy in health department services.
Grant acquisition will continue to be a high priority as a means of diversifying both funding and professional opportunities. Program planning will also incorporate state grant expectations into program design in order to increase efficacy and maintain program sustainability. Fiscal sustainability will be continuously monitored.

Hiring Practices - The documented hiring process ensures that every candidate is subject to the same level of scrutiny and the highest quality employees are sought through the hiring process. This not only helps guard against charges of discrimination, but also supports a process that prevents essential elements from being left out. The documented hiring process helps allow the organization to see at-a-glance that every element of the hiring process has been consistently completed.

Monitoring of Fiscal Sustainability Risk-Reduction Results

Each month program leadership receive activity reports for grants. These activity reports provide clear and concise data regarding all allowable costs that occurred during the said month. These reports assist leadership in working with staff to manage all grant deliverables timely and accurately. Ensuring the health department meets grant deliverables in a timely and accurate manner creates grant sustainability, as well as, strong and professional partnerships with all funders.

Understanding the importance of diversified funding, the health department researched and reviewed 125 different federal, state, and local grant opportunities and almost 40 community foundations, most of which reflected activities related to recognized client and community needs in order to enhance fiscal sustainability.

The health department participates successfully in federal, state and local county audits. These fiscal audits thoroughly review our internal and external controls practices, fiscal policies, and financial procedures. Furthermore, auditors test our procedures to ensure the health department is conducting business based on best practices.

Inclusion of Risk Reduction in Employee Training

All staff are offered training on roadside safety. Kendall County Health Department partners with local law enforcement to deliver this unique opportunity that teaches staff how best to prepare for and drive in hazardous weather conditions; develop an understanding and awareness of traffic patterns; and what to expect and how to act when being approached by an Officer of the law. Additionally, staff receive and review the Vehicle Safety Protocol, which teaches a safety first philosophy as it applies to the use of a Health Department vehicle to perform a work related function.

Annually, all staff receive participatory ethics training, anti-harassment training, and perform a review of the Ethical Standards & Rights of Persons Served Policy. Staff also receive training on the many facets of cultural equity, fostering a strong ethical culture and the provision of services that thoughtfully consider the rich and valued diversity of our stakeholders. Additionally, staff receive training on the laws, importance of, and ways in which to protect and maintain confidential, client information.
SOLID WASTE PLAN EXECUTIVE SUMMARY

2016 marks the first year of a new five year cycle of the Kendall County Solid Waste Plan. Environmental Health Staff is currently making progress fulfilling the objectives outlined in the new 2015-2020 Plan. Activities completed this year are outlined below, organized by category as laid out in the plan.

ADMINISTRATIVE OBJECTIVES
Elements of the new Solid Waste Plan including legislation monitoring and legislative/policy work have been integrated into the 2016 Health Department Strategic Plan and will continue to be in future editions. Kendall County Health Department monitors specific legislation impacting solid waste issues locally, across the state and across the nation. Additionally, Environmental Health Staff continue to be involved in key state organizations focusing on solid waste, such as ILCSWMA (Illinois Counties, Solid Waste Management Association).

RECYCLING & SOURCE REDUCTION OBJECTIVES
Understanding the importance of education in the matters of recycling and source reduction, Environmental Health Staff works to educate the community in different ways on the broad topics of recycling and source reduction.

To this end, EH Staff continues to presented at the Kendall County Natural Resources Tour, where 450 fourth and fifth grade students from Yorkville, Oswego and Plano schools attended one of the 3 full day events and learned about proper disposal and recycling of everyday household items.

Staff were guests on local TV (WAUR TV 30) and Radio (WSPY 107.1FM) discussing electronics waste (e-waste) disposal, general recycling and other solid waste issues. These shows offer a mixture of presentation and question and answer and these stations are very popular in this area. Staff was also interviewed by a local newspaper concerning e-waste recycling. The Solid Waste Program Coordinator provided a presentation to the Environmental Health Advisory Board focusing on e-waste recycling and related legislation.

Additionally, work began to update the Kendall County Green Pages, a resource guide for Kendall County residents outlining proper disposal and reuse of common household items. The new version should be available on the Kendall County Health Department website by January of 2017 and will feature a more focused approach.

Staff worked with municipal stakeholders to learn about existing electronics and household hazardous waste recycling in Oswego, Plano and Yorkville. Additionally, staff met with Waste Management to discuss curbside pickup of E-waste and household hazardous wastes in unincorporated parts of Kendall County.

Staff worked to stay apprised of the changing recycling and source reduction landscape, participating in regional discussions concerning glass value and recycling, reading and sharing a recently published work, “Estimating E-Scrap in Illinois Counties for Improved Collection Strategies for the State” and reviewing notes from the Illinois Product Stewardship Committee’s electronics waste subcommittee on legislative actions to address current concerns.

Work also began to build a program to recognize local businesses that practice innovative waste reduction and recycling. The initial focus for this project will be local restaurants and a survey has been created to be delivered early next year. Data will be analyzed shortly thereafter.
♦ Composting Objectives
To stay apprised of current compost issues, staff participates in the Illinois Food Scrap Coalition, whose focus is to address food composting practices and legislation, specifically in northeastern Illinois. Staff was part of regional meetings and reviewed legislation on the issue.

Staff also visited and closely monitored the Green Organics Composting Facility this year as the facility changed hands and is now operating under new ownership. The focus of the visits and monitoring was determining that the Special Use Permit, granted through Kendall County, was still in effect and was being followed after the transition had taken place and the new company was operating.

♦ Waste to Energy Objectives
Staff members organized and participated in a trip to Covanta Waste to Energy Facility in Indianapolis, Indiana. Invitations were sent to advisory board, Board of Health, and County Board members. The purpose of the trip was to learn how a functioning waste to energy facility operated, what it needed to operate and the impacts on a community. This information was shared with the full Environmental Health Advisory Board at a subsequent meeting.

♦ Transfer Stations Objectives
A new transfer station approved and built within Plano city limits. This facility did enter into a host agreement with Kendall County.

♦ Landfill Objectives
Staff note that there are no new landfills proposed in Kendall County.
The composition of the Kendall County Health Department workforce is primarily comprised of approximately 50 full time employees. The Health Department human resources consist of approximately five part time additional employees and four contractual staff at any given time. The Health Department is also honored to host university intern and professional volunteer, as opportunities arise.

**Commitment to Excellence**

The Kendall County Health Department is committed to excellence in workforce development. To that end, all new employees will receive unit specific orientation/training. Professional development opportunities should also be available through planned learning at team meetings or outside training. Planned learning in team and/or partnership meetings provide a vital source of fresh and timely workforce development. The Kendall County Health Department provides documented personnel training on diverse aspects of workforce development including but not limited to appropriate personnel in the following areas:

- Employee Orientation (provided to all new employees by supervisor/designee within first 30 working days of employment.)
- Emergency Drills
- Confidentiality/Privacy
- Customer Service
- Cultural Competence
- Ethical Practices
- Person/Population Wellness
- Person-Centered Practices
- Reporting Abuse/Neglect
- Unique Needs of Persons/Population Served

The health department provides detailed training to appropriate employees while documenting training content. Individual employees sign training content or group signs training log. This includes but may be not limited to the following:

- Confidentiality Practices
- Cultural Competence
- Performance Management

Additional competency-based training is provided to appropriate employees by supervisor/designee on an annual basis and signed by employee:

- Safety Practices
- Medication Management (as appropriate)
- Universal Precautions

**Ongoing Planning**

The Kendall County Health Department strategically aligns our workforce with our organizational goals and plans. The Health Department works to ensure that the organization continuously has the right people with the right skills. Our workforce development supports the development of the current workforce, considers future workforce development needs, and identifies workforce development gaps. This dialogic analysis may be triggered through grants research, literature review, potential retirement, planned departure, or the unplanned departure of any employee.
**Job Descriptions/ Review and Update** – Job descriptions have been carefully prepared to reflect the breadth of each employee position. Job descriptions are reviewed as needed and each employee is provided a copy of their job description for review and signature upon hire and upon any slight change to the job description. Job descriptions allow each employee to provide an array of programmatic services permitted by their credentials and supervisory direction. This not only provides for wonderful workforce development and job enrichment opportunity, but also prepares programs for professionals with potential succession possibilities.

**Recruitment and Selection** – The recruitment and selection process is designed to consider workforce gaps and to continuously support our community work by hiring the right people with the right skills. First, there is a dialogic analysis of the best way to fulfill our contemporary workforce needs. Then the job posting as well as the job description are reviewed and revised, as needed. Finally, a two-tiered interview process is thoughtfully carried out. This process is designed to allow workforce development opportunity for employees participating in the interviewing process. This is a consistent as well as a highly rigorous process that culminates in the final decision being made by executive leadership.

**Retention and Succession** – Employee retention and succession are actively supported through organizational learning and workforce development opportunities, in that our workforce development efforts also close gaps in future workforce needs.

The Health Department reviews talent in the current workforce and promotes cross training as well as diverse position-related experiences for our current employees.

The strategic development of our current workforce contributes to each employee feeling valued and knowing that choices for a broader array of employment opportunity inside or outside our organization are made more readily possible through professional development.

The Kendall County Health Department is proud to consider internal qualified candidates for current and newly developed position openings.

Offering employees an array of work experiences contributes to employee retention, worker knowledge, and greater potential succession success.

**THE LEARNING ORGANIZATION & ANDRAGOGY**

The Kendall County Health Department; in acting as a learning organization, places an emphasis on adult learning theory. That is to say that contextualized learning, dialogic learning, and educative team meetings are highly valued as learning organization and workforce development opportunities. As a learning organization the Health Department fosters knowledge production of its members in order to continuously transform itself. Learning theory refers to *Andragogy* as the centerpieces of adult learning. Andragogy is the art and science of adult learning, thus andragogy refers to any form of adult learning.
There are four principles that are applied to Andragogy and are especially applicable to learning embedded in the learning organization (See appendix for larger version of chart):

- Adults are motivated to have a participatory role in their own learning.
- Contextual experience provides the central basis for learning activities.
- Adults are readily interested in subjects that have immediate relevance to their job or personal life.
- Adult learning orientation can move from problem-centered to appreciative inquiry.

**IMPLEMENTATION OF WORKFORCE DEVELOPMENT OPPORTUNITIES**

Staff have access to a broad and diverse range of work-related opportunities that serve in part to help develop and strengthen their professional skills, knowledge and abilities. Each staff is empowered and inspired to develop the leader within.

Staff are able to develop their professional and leadership skills by actively participating in the interviewing process where they help articulate, maintain and fortify a positive organizational culture. Staff also have the opportunity to provide program reports to members of governance, and meet with and educate community partners including physician interns.

Staff participate in the creation of Outcome Model, receiving hands-on experience in the use of performance management processes such as root cause analysis. Implementing Outcome Model provides staff with exposure to pursuing quality improvement as they participate in the cycle of Plan, Do, Study, Act.

Staff are engaged in the lengthy and intensive planning and formation of the Community Health Improvement Plan; and annual written updates to Strategic Plan and Annual Report. This complex process offers a wide range of professional development opportunities such as; research methodology, data collection, document preparation, ethnographic interviewing, data analysis, trend charting, literature reviews, scientific writing, program development, and systems improvement exposure.

Staff develop and enhance their public speaking skills through local television appearances and radio broadcasts; and contribute to website and social media messaging. Workforce development through quarterly All-Staff Meetings; in which staff participate in presentations related to health and wellbeing from the diverse organizational sectors, is another powerful example of preparing a workforce for readiness related to their professional future as well as for the future needs of our organization.
APPENDIX
February 21, 2017

This represents the Board of Health's endorsement of the Kendall County Health Department 2021 Strategic Plan. Board of Health members, Advisory board members and Kendall County Health Department staff provided input throughout the development of the Strategic Plan.

On February 21, 2017 the Board of Health unanimously approved the 2021 Strategic Plan and pledged human and fiscal resources necessary for its implementation.

Christina Cooper
President Kendall County Board of Health

February 21, 2017
Date
## STRATEGIC PLAN PARTICIPANT/PARTNERS

<table>
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<tr>
<th>NAME</th>
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<tr>
<td>Alford, Diane</td>
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The mission of the Kendall County Health Department is to promote physical health, mental health, environmental health, protect the community’s health, prevent disease, and promote family economic self-sufficiency through both person based services and population based programs.

- Provide both person based services & population based programs; Our health department takes great care to provide both person-based as well as population-based health and well being programs for our communities. Our diverse person-based services such as home weatherization, addictions treatment, and person centered nutrition consultation are vital to the wellness of the communities we serve. Our population-based services such as radon education, energy conservation education, suicide surveillance (trend monitoring), communicable disease prevention, and emergency preparedness work are vital to the wellness of the communities we serve. As a provider of both person-based as well as population-based health and well being services, we are poised to use such breadth of understanding to employ effective prevention information, interventions, and strategies on behalf of community wellness.

- Support family economic self-sufficiency; All families and individuals want to maintain financial well being, remain free of socioeconomic dureses, and protect themselves from the debilitating effects of poverty. Overcoming poverty and chronic unemployment is crucial to family well being. Holistic programs that simultaneously address skills alongside household supports are more likely to have success in helping families achieve self-sufficiency.

- Implement an ongoing program of assessment of needs and resources, develop policies to encourage better health, and assure that needed services are available.

- Promote health by providing educational programs in physical, mental and environmental health, alcohol/drug abuse, tobacco control, and injury and violence prevention, etc.

- Develop and disseminate materials and programs to educate and inspire residents about healthy behaviors and healthy living.

- Protect public health by providing immunizations and investigating communicable disease.

- Assure community health by monitoring drinking water, inspecting food establishments and food handling, and monitoring the storage and disposal of wastes.

- Provide outpatient mental health and chemical dependency services to county residents of all ages.

- Improve access to care by utilizing the services of the private health sector and by providing services to those with limited resources.

- Prepare the community for human initiated & natural hazards via emergency preparedness planning.

**BOARD OF HEALTH VISION STATEMENT**

The Kendall County Board of Health is dedicated to promoting the health and well-being of the people in our community.

Mission Statement Approved by Board of Health – April 19, 2016/Vision Statement Approved by Board of Health – 05/17/16
Why we Plan

Kendall County Health Department
1/19/16 Board of Health 2021 Strategic Planning Preparation
Reflections on the Purpose and Worth of Strategic Planning

- Educate community
- Evaluate effectiveness
- Message via new web site
- Benefits of partnerships
- Details the how of services
- Accountability & collaboration
- Gives direction
- Effectiveness & efficiency
- Organizational learning
- Refreshes vision
- Look back & look forward
- New opportunity
- Fiscal planning
- Improves program
- Integrated vision
### Process Tools

**Kendall County Health Department**

**2/23/16 Strategic Planning Kick-Off**

**What People Might Be Surprised To Know (of Our Health Department Work):**

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<th>Service</th>
<th>Benefit</th>
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<td>Suicide Prevention</td>
<td>Depth of Knowledge</td>
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<td>Addiction Treatment</td>
<td>Respectful Organization</td>
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<td>Crisis Response</td>
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<td>Lead Education</td>
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<td>Developmental Disability Family</td>
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<td>Radon Education</td>
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<td>All Income Levels</td>
<td>Family Counseling</td>
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<td>Diversity of Resources</td>
<td>Forensic Interviewing</td>
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**Comments From March 11, 2016 All Staff Meeting**

- Caregiver Support
- Embrace Cultural Diversity
- Breastfeeding Support
- Nutrition Education/Outreach
- Case Management
- Referral Source/Linkage to Other Community Services
- Nuisance Complaints – getting neighbors to talk to each other about issues
- Veterans Counseling
- Individual Elder Counseling
2/23/16 STRATEGIC PLANNING KICK-OFF

HOW MAY WE COMMUNICATE ALL WE DO FOR THE COMMUNITY (THAT WE CARE):

Open House                  Engage Fire
Local Television           Engage Ministers
Local Radio                Youth Leadership
Booths at Fairs            Hospital Connections
Facebook Messaging         Physician Offices
New Newsletter             Civic Organizations
Face to Face               Inventory Organizations
Responsive Messaging       Municipal Involvement
Targeted Messaging         Twitter Messaging
Social Media               Cultivate Advocates
School Organizations       Travel Agencies
Educate Youth              Community Contest
Faith-based Support        Business Cards
Plan Engagement            YouTube
Engage Police              Ever Evolving
Engage Coroner

COMMENTS FROM MARCH 11, 2016 ALL STAFF MEETING

Greeting People in Lobby
Asking if we were able to help today
Treating each other well/with respect
Not come in as an “enforcer” but as partner to provide better services
Word of mouth – clients talking to others about their experience at KCHD
Empathy/Dignity
The recognition of internal assets and opportunities helps an organization accomplish its mission, which is a culmination of both organizational mandates and governance vision. Assessing the relationship between internal assets and internal opportunities can produce heightened public value for the organization.

1. Complete the *Internal Assets* column until the most salient ones have been listed.
2. Complete the *Internal Opportunities* column for any asset with a related opportunity to be listed.
3. Complete the *Reconciling Reflections* column for any cited asset accompanied by an opportunity.

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<th>Internal Assets</th>
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<th>Reconciling Reflections</th>
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The recognition of external assets and opportunities helps an organization accomplish its mission, which is a culmination of both organizational mandates and governance vision. Assessing the relationship between external assets and external opportunities can produce heightened public value for the organization.

1. Complete the *External Assets* column until the most salient ones have been listed.
2. Complete the *External Opportunities* column for any assets with a related opportunity to be listed.
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The recognition of distinctive organizational competencies helps an organization accomplish its mission, which is a culmination of both organizational mandates and governance vision. Assessing the relationship between critical successes and organizational competence can produce heightened public value for the organization.

1. Complete the Critical Successes column until the most salient ones have been listed.
2. Complete the Factors for Success column for any assets with a related opportunity to be listed.
3. Complete the Capabilities as Resources column for any cited pairing of critical success with related factors for success.

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Identifying the organization’s stakeholders is an important step in the strategic planning process. An organization’s stakeholders include any person, group, or organization that can place a claim on the organization’s attention, resources, or that is affected by the services.

<table>
<thead>
<tr>
<th>External Stakeholders</th>
<th>Type of Involvement</th>
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<tbody>
<tr>
<td></td>
<td>Ignore Stakeholder</td>
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<tr>
<td></td>
<td>Inform Stakeholder</td>
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<td>Decision Maker</td>
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<tr>
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<td>Delegated Authority</td>
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</tbody>
</table>

- 68 -
BE IT REMEMBERED, at a regular meeting of the Kendall County Health Department Governance, held on the 20th day of September 2016, the following Resolution was adopted:

WHEREAS, the accredited and nationally recognized Kendall County Health Department celebrates 50 years of dedicated community service; and

WHEREAS, these services are reflected in the dedicated staff/volunteers working in the diverse sectors of community action, behavioral health, environmental health, community health, emergency preparedness, and program support; and

WHEREAS, the Health Department has been recognized for fostering "a sense of respect for clients and employees"; and

WHEREAS, "the Kendall County Health Department is seen as collaborative, innovative, approachable, and transparent by those who work closely with the organization"; and

WHEREAS, "the organization is commended for its efforts in thoroughly assessing the needs of its community and responding proactively as evidenced by its community health assessment and strategic plan"; and

WHEREAS, "the Health Department has a dedicated, hardworking, competent executive leadership team that provides vision and strategic planning while fulfilling multiple roles to support the work of the organization"; and

WHEREAS, the staff/volunteers of the organization strive "to provide culturally competent services to an increasingly diverse community" and the Board of Health wishes to express humble gratitude for such caring dedication to community members;

NOW THEREFORE BE IT RESOLVED that the Kendall County Board of Health officially expresses deep appreciation for past and present staff as well as volunteers on this 50th Anniversary year and wishes continued success for services worthy of every precious person served.

DONE IN OPEN SESSION this the 20th day of September, 2016.

Christina Cooper
Board of Health President
The chart below displays how the County’s share (8.6%) of tax dollars are dispersed to the various funds and organizations.
Kendall County Population Growth vs. Health Department Full Time Employee Growth

Kendall County Population Growth

KCHD FTE Growth
ROMA, Results Oriented Management and Accountability, is a best practice tool that provides for an accountability process used to report outcomes achieved; a conceptual framework for measuring the results of programs and services; and a continuous process of assessment, planning, implementation and evaluation of results.
The Effectiveness Insight Instrument (EII) – Contains, for each division, a set of benchmarked questions that allow for trend analysis among/across all four divisions. While the Program Directors are concerned with the results of their respective unit, the Program Administrator is also interested in thematic issues (or positive things). Division directors present on the results of their own unit’s EII, while the Program Administrator presents on any organizational themes/trends revealed. A score of < 3.5/4 may be cause for concern and inasmuch begs a careful review and consideration.

- The EII is an efficacy measurement, done by “experts”, those we serve.
  - We seek more than client satisfaction; we seek their insights and input.
- Lets us know how things are working
- Reveals areas for improvement
- Allows us to recognize and celebrate our achievements

### 2015 EII - Org.-wide Results - Benchmarked Questions (N=227)

![Bar Chart]

### 2015 Effectiveness Insight Instrument - Org-wide Results for Benchmarked Questions

<table>
<thead>
<tr>
<th>Metric</th>
<th>CAS</th>
<th>CHS</th>
<th>EHS</th>
<th>MHS</th>
<th>Results</th>
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<tbody>
<tr>
<td>Number of Surveys</td>
<td>67</td>
<td>75</td>
<td>35</td>
<td>50</td>
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<tr>
<td>Overall Rating</td>
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<td>3.9</td>
<td>3.7</td>
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<td>Treated with Respect</td>
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<td>Helpfulness/Effectiveness</td>
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<td>Low Score</td>
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</table>

Prepared by Steve Curatti – 2/16
There are four principles that are applied to Adrogogy and are especially applicable to learning embedded in the learning organization:

1. Adults are motivated to have a participatory role in their own learning.
2. Contextual experience provides the central basis for learning activities.
3. Adults are readily interested in subjects that have immediate relevance to their job or personal life.
4. Adult learning orientation can move from problem-centered to appreciative inquiry.

Image Source:
http://leanlearning.wikispaces.com/instructional design
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- A Sustainability Planning Guide for Healthy Communities (Centers for Disease Control, 2016) 2017
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## Adoption/Revision/Approval Dates

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<th>Date Revised</th>
<th>Article &amp; Section</th>
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<td>Updates Reviewed &amp; Adopted by Board of Health</td>
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