

Stratford Health Department

Strategic Plan FY 2014 - FY 2019

Strategic Priority # 1: To strengthen ability to protect the health of the community.

Action Steps	Timeline	Staff Responsible	Outcome Indicators	Status/Notes
Conduct inventory of local public health ordinances and compare to State Public Health Code.	5/1/2014	Environmental Health Supervisor (EHS)	Inventory of contradictory regulations that need revision.	EHS to work with staff and interns to complete project.
Draft changes to appropriate local ordinances to reflect State Public Health Code.	7/1/2014	EHS	Draft ordinances.	
Review and approve revisions internally.	8/1/2014	Director of Health (DoH)	Minutes from meetings with staff.	
Present proposed revisions to ordinance committee and Town Council for approval.	9/1/2014	EHS and DoH	Agendas/Minutes from meetings.	Protocol for process created by ALB
Create SMART objectives for implementation of revised ordinances to include: communication plan; enforcement; evaluation measures to determine effectiveness.	1/1/2015	EHS and DoH	SMART objectives for each ordinance.	Work with Environmental Health Staff.

OBJECTIVE 1.2: Standardize procedures to address local health services.

Action Steps	Timeline	Staff Responsible	Outcome Indicators	Status/Notes
Catalogue existing procedures/protocols for services in all areas of SHD – Nursing, Health Education, Public Health Emergency Preparedness, Administrative, etc.	10/1/2013	Nursing Supervisor (N)S, Health Educator (HE), Assistan DoH (ADoH), DoH, EHS	Catalogue of current protocols.	Regular SOP meetings for Environmental Staff. Current SOPs on Public server.
Identify procedures/protocols that need updating and conduct gap analysis to identify areas that need new procedures/protocols.	1/1/2014	NS, HE, ADoH, DoH, EHS	List of procedures/protocols that need updating and list of needed.	EH staff meeting regularly for SOP meetings.
Revise/develop procedures/protocols with review of relevant laws, codes, grant requirements, etc. to ensure adherence.	7/1/2014	NS, HE, ADoH, DoH, EHS	New protocols with citations of relevant laws, codes, etc.	EH staff meeting regularly for SOP meetings.
Review and approve revisions internally.	8/1/2014	DoH	Minutes from meetings.	
Post new procedures/protocols on shared folder on computer for all to access.	9/1/2014	ADoH	Shared folder on server.	Shared folder exists – needs organization.



Educate appropriate parties on new procedures/protocols.	9/1/2014	Supervisors	Meeting minutes.	Share at regular staff meetings.
Evaluate implementation and efficacy of new procedures/protocols.	Ongoing	Supervisors	Staff reviews.	
OBJECTIVE 1.4: Ensure appropriate health	n department ac	ctivities are undertaken w	th respect to environmental	contamination.
Action Steps	Timeline	Staff Responsible	Outcome Indicators	Status/Notes
Inventory current SHD activities with respect to environmental contamination.	7/15/2013	DoH	List of active projects.	
Reorganize Environmental File Cabinet so that files are filed by address (not site name).	8/12013	Administrative Clerk	Completed reorganization	
Conduct in-service on the Raymark site project, including database review and SSVS documentation.	7/1/2013	DoH	Agenda, Minutes	
Connect with Economic Development & Conservation about Brownfields progress	On-going 7/1/2018	DoH	Emails, agenda, minutes	On-going
Research Health Impact Assessment work and	1/12014	DoH	List of potential grants	



potential grants

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Strategic Priority # 2: To monitor and promote community health and well-being.

OBJECTIVE 2.1: Collect and analyze data to inform health promotion strategies.					
Action Steps	Timeline	Staff Responsible	Outcome Indicators	Status	
Continue involvement with Primary Care Action Group (PCAG) to implement regional CHIP.	Ongoing 7/1/18	DoH	Agendas, minutes.	In process	
Assess portions of the CHA and CHIP that are relevant to Stratford.	8/1/2013	Community Services staff (CSS), DoH, ADoH, NS, HE	Stratford health profile.	In process	
Share the CHA and CHIP with staff, stakeholders, and community.	8/1/2013	DoH, ADoH, CSS	2 examples of sharing information.	In process – Main Street Festival	
Gather input from community and stakeholders in relation to the CHA and CHIP.	8/1/2013	DoH, ADoH, CSS	Documentation of comment forms, public forums, etc.	In process – Main Street Festival	
Map internal assets to determine if in-house capacity exists to carry out CHIP activities.	1/1/2014	DoH, ADoH, CSS	Agendas, minutes.		
Prioritize CHIP activities and create SMART objectives for implementation of evidence-based strategies.	1/1/2014	DoH, ADoH, NS, HE, CSS	SMART objectives that incorporate health equity/social justice principles.		
Implement CHIP activities locally and regionally.	Ongoing 7/1/18	SHD, PCAG	Evidence-based strategies implemented.		
Create and implement benchmarks and evaluation measures for specific activities.	Ongoing 7/1/18	SHD, PCAG	Measures to indicate health improvement.		
Reevaluate Community Health Data measures through future Community Health Assessments.	Ongoing 7/1/18	SHD, PCAG	Updated CHA at minimum every 5 years		
OBJECTIVE 2.2: Advocate for the incorporate	ation of health into	policy-making decision	ns.		
Action Steps	Timeline	Staff Responsible	Outcome Indicators	Status	
Participate in 10-year Plan of Conservation and Development.	1/1/2014	DoH, ADoH	Meeting agendas, minutes. 10-year plan that contains strategies that promote health.	In process	
Participate in Brownfields redevelopment	Ongoing 7/1/18	DoH	Meeting agendas, minutes.	In process	



projects.			Strategies that that protect and promote citizen health incorporated into projects	
Participate in Board of Education initiatives (Wellness committee, School Nurse meetings, SRACCAC, etc.)	Ongoing 7/1/18	CSS, DoH, ADoH, NS, HE, EHS	Meeting agendas, minutes. Policies that promote student health and well- being	In process
Attend Town Commissions meetings as appropriate to advocate for the inclusion of health promotion strategies.	Ongoing 7/1/18	CSS, DoH, ADoH, NS, HE, EHS	Meeting agendas, minutes.	In process
Work with CADH to advocate for Public Health at the State level.	Ongoing 7/1/18	DoH	Meeting agendas, minutes.	In process



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Strategic Priority # 3: To strengthen organizational capacity and quality.

Action Steps	Timeline	Staff Responsible	Outcome Indicators	Status/Notes
Assign each staff member a PHAB domain.	7/1/2012	ADoH	List of assignments.	Completed
Create an inventory, gap analysis, and work plan for each measure.	7/1/2013	All Staff	Staff presentations with agendas and minutes.	In process
Create a system for collecting and storing PHAB documentation.	7/1/2012	ADoH	Shared computer folders .	In process
Implement work plan for each domain.	7/1/2014	All Staff	Updates on work plan.	In process
Meet monthly to review work plan progress.	7/1/2014	ADoH	Agendas and minutes.	
Submit application for intent to apply for PHAB accreditation.	1/1/2014	DoH, ADoH	Completed application.	
Review PHAB documentation to ensure required documentation.	7/1/2014	ADoH	Completed application.	
Submit final application and documentation along with appropriate fees.	7/1/2014	ADoH	Completed application.	
OBJECTIVE 3.2: Establish continuous qua	lity improvemen	t processes.		
	Timeline	Ctoff Dooponoible	Outcome Indicators	Status/Notes
Action Steps	Timeline	Staff Responsible	Outcome marcators	Status/Notes
Have all supervisors take at least one Quality	12/1/ 2013	EHS, ADoH, NS, CSS	Training agenda and program material.	Status/Notes
Have all supervisors take at least one Quality Improvement (QI) course (Basic PDCA)		EHS, ADoH, NS,	Training agenda and	Status/Notes
Action Steps Have all supervisors take at least one Quality Improvement (QI) course (Basic PDCA) Train all staff on concepts of QI Create formal QI plan	12/1/ 2013	EHS, ADoH, NS, CSS EHS, ADoH, NS,	Training agenda and program material.	Status/Notes
Have all supervisors take at least one Quality Improvement (QI) course (Basic PDCA) Train all staff on concepts of QI Create formal QI plan	12/1/ 2013 7/1/2014 11/1/2013	EHS, ADoH, NS, CSS EHS, ADoH, NS, CSS DoH	Training agenda and program material. Training agendas. Completed QI plan.	Status/Notes
Have all supervisors take at least one Quality Improvement (QI) course (Basic PDCA) Train all staff on concepts of QI	12/1/ 2013 7/1/2014 11/1/2013	EHS, ADoH, NS, CSS EHS, ADoH, NS, CSS DoH	Training agenda and program material. Training agendas. Completed QI plan.	Status/Notes



Develop system to track press releases and press coverage for specific events and implement system.	Ongoing 7/1/2018	ADoH, HE	Completed system in place. Review of tracking procedures.	
Evaluate how the public learns about SHD programs, services, and health alerts.	Ongoing 7/1/2018	ADoH, HE	Survey form that can be used to evaluate how public obtains messages and media preferences.	
Identify key commissions that may need to interact with SHD and determine which ones would benefit from a review of HD purview.	7/1/2014	DoH, ADoH	Agendas, minutes	

OBJECTIVE 3.4: Establish organizational performance management system for personnel.

Action Steps	Timeline	Staff Responsible	Outcome Indicators	Status/Notes
Establish SMART goals for each staff member that align with the Strategic Plan.	12/1/2013	EHS, ADoH, NS, CSS	Employee reviews contain: 1 goal related to PHAB work; 1-2 goals for the department and 1 goal for professional development.	In-progress as each staff member is being reviewed 2012-2013 time period
Identify performance measures specific to individual and position.	12/1/2013	EHS, ADoH, NS, CSS	List of performance measures for each employee.	
Ensure that staff annual reviews are performed in accordance with contracts and are done on time.	12/1/2013	DoH, EHS, ADoH, NS, CSS	Master list of employee review schedule and timely reviews on file.	
Establish and implement a written 6-month evaluation system to review goal attainment, areas of improvement, ideas on how to achieve goals, etc.	6-mo mark of each staff members review.	EHS, ADoH, NS, CSS	Revised goal statements (and progress to date annotated).	
Adapt workforce development plan to align staff goals with strategic directions as well as training needs, professional development, certifications, etc.	8/1/2013	ADoH	Completed plan.	In process. First draft created. Under review by DoH.

OBJECTIVE 3.5: Establish an integrative performance management system for the organization.



Action Steps	Timeline	Staff Responsible	Outcome Indicators	Status/Notes
Research organizational Performance Management Systems. Identify a framework that can be adapted for use at SHD.	6/1/2013	DoH	Agenda and Minutes.	In-progress. ALB Report out at PHAB meeting with staff scheduled for May 23, 2013. Review PHAB requirements for PMS. Visit NACCHO toolbox.
Collate FY14 staff goals and ensure they are in line with strategic priorities.	7/1/2013	DoH	Employee goals on board in DoH office.	In-progress. Present to staff at next PHAB meeting.
Create a performance management plan for the organization that includes operational plan, specific benchmarks to measure progress, and evaluation.	9/1/2013	DoH	Completed plan.	
Meet with supervisors to review plan.	8/1/2013	DoH	Agendas and minutes.	Present draft of PMS to Leadership team.
Implement the Performance Management System Plan.	1/1/2014 Ongoing 7/1/2018	All staff	Agendas and minutes. Review if benchmarks are being met and conduct evaluation.	

