



# Strategic Plan

2020 – 2024

*Preventing illness, promoting wellness  
and protecting public health since 1973*

**Approved by the Board of Health on November 14, 2019**

## Strategic Planning Participants:

**Heidi Clifford**  
Board Member  
Town of Killingly

**Debra Colletti**  
Secretary/Receptionist  
NDDH

**Linda Colangelo**  
Education and Communications  
Coordinator  
NDDH

**Kendra Curran**  
Health Education Assistant  
NDDH

**Tracy Farrow**  
Secretary/Receptionist  
NDDH

**Donald Gladding**  
Board Member  
Town of Plainfield

**David Griffiths**  
Chairman of the Board  
Town of Killingly

**Anna Griggs**  
Administrative Assistant  
NDDH

**Terre Hendricks**  
Registered Sanitarian  
NDDH

**Robert Kelleher**  
Vice-Chairman of the Board  
Town of Brooklyn

**Elaine Lippke**  
Board Finance Chair  
Borough of Danielson

**Maureen Marcoux**  
Registered Sanitarian  
NDDH

**Derek May**  
Public Health Emergency  
Preparedness Coordinator  
NDDH

**Melissa Nichols**  
Finance and Human Resource  
Manager  
NDDH

**Brittany Otto**  
Environmental Health Specialist  
NDDH

**Michele Penkauskas**  
Administrative Assistant  
NDDH

**Lana Salisbury**  
Board Member  
Town of Sterling

**Megan Shippee**  
Office Assistant  
NDDH

**Sue Starkey**  
Director of Health  
NDDH

**Nathan Swift**  
Board Member  
Town of Union

**Sherry Vallone**  
Complaints Investigator  
NDDH

**Janine Vose**  
Public Health Nurse  
NDDH

**With thanks to our facilitator John Miller of JPM Future Management, LLC.**

## **Strategic Planning Process**

NDDH Board and staff have routinely reviewed progress towards our 2014-2019 strategic goals. In 2018, the Board's Quality Improvement Committee discussed updating that plan. In early 2019, staff began to discuss strategic priorities, taking into account the 10 Essential Public Health Services; community health needs and interest levels in programs; workload and staffing levels; information technology; and policies, procedures and practices that help or hinder our work. In 2019, Quality Improvement and Executive Committee members met with a strategic planning facilitator to plan an approach that would engage Board members and result in a plan that would be supported by Board and staff alike. At their June meeting, the Board, recognizing staff expertise and commitment, voted to give them equal space at the table during a September strategic planning event. Staff met over the summer to discuss our Mission, Vision, Strengths, Weaknesses, Opportunities and Threats then shared the materials with the Board. On September 12, 2019, seven Board members and 15 staff members participated in a four-hour facilitated strategic planning session. There was general agreement that programs and customer service, workforce development and information technology are our most important strategic issues.

## **Strategic Plan Timeframe**

This is a five-year strategic plan. The first six months to twelve months will be dedicated to the planning and coordination efforts required for actual implementation. The plan includes objectives that are foundational; they must be implemented before taking further action and will provide lasting benefit. The objectives are expected to be achieved within two to three years. In the fall of 2022, a strategic planning committee will convene to update or create new objectives for the years 2023-2024.

## **Monitoring Progress**

Updates on progress towards the attainment of our strategic goals will be provided in reports to the Board that will be available online for the general public.

## **Customer Satisfaction**

A major theme in the strategic planning discussions was customer service. NDDH serves many customers and they tend to have widely different performance expectations. For example, the state legislature, Department of Public Health, town leaders and general public expect NDDH to meet all requirements of the law. Consequently, we will measure our consistency in following and enforcing public health laws. Our plan includes implementing systems to track completion rates for inspections and permitting.

Customers who attend programs or events can be surveyed directly utilizing standardized forms to assess satisfaction. Townspeople and town leaders are also customers and our plan includes developing tools and materials for Board members to liaise with those they represent. Employees are "customers" with needs that must be met in order to retain a qualified workforce so we will introduce an employee satisfaction survey. Additionally, the Board has established a Board Satisfaction Survey.

Our plan to implement a performance management program and create a culture of continuous quality improvement is based on our values and our drive to ensure the highest levels of service and customer satisfaction.

## Strengths, Weaknesses, Opportunities, Threats

**Strengths:** We have dedicated, trusted, experienced staff with good reputations locally, across the state and nationally and provide workforce development and tuition reimbursement opportunities. Our By-laws, personnel policies, food service and salon ordinances are updated. Budget oversight and operational controls are consistently excellent: general and specific financial reserves are in place; we have a balanced funding mix of per Capita, fees/fines, and grant income. NDDH can accept charitable donations. Communications strategies include regular staff and board meetings, timely issues reports, board retreat and surveys; community information sharing through receptions, forums, media, and conversations with partners and residents. Our website allows 24/7 access to information and some permitting services including online documents and bill-pay. Our location is good and space sufficient to hold public events. NDDH and State databases are safe and secure. We work collaboratively with groups in the district and beyond including: HealthQuest, school nurses, housing, food service, Medical Reserve Corps, public health preparedness, local health care providers, CT DPH and other health departments. This is a small, connected community with a strong public health system.

**Weaknesses** Information technology applications for public health services are lacking. Progress towards full online services is limited by staffing capacity; scanning online documents is time-consuming. Measurement and tracking of services are challenges especially the time burden for data entry. Board meetings and conversations with town officials are limited as is the awareness of the role of NDDH during emergencies. Our workload often exceeds workforce capacity. Many written procedures need updating (which pulls staff away from work). PH events are often novel or unique, so protocols are hard to write. We have a limited number of food inspectors registered sanitarians and staff with MPH credentials, leadership training or grant writing skills. Our community health needs assessment and health improvement plan should be updated with an increased emphasis on community input. We need a pipeline for succession planning. We need to ensure 24/7 availability to do inspections and emergency response.

**Opportunities** Data systems for document, project and customer service management are available as are systems for tracking quality improvement measures, billing and emergency communications. Customers want ability to track progress on their permit applications online. Fee-based services such as pre-occupancy inspections, fines for Public Health Code Violations, regional building official services, employee wellness programs, or partnerships with insurance companies to implement community or workplace education programs should be explored. Assessment tools such as Public Health Core Competencies can be incorporated in our workforce development plan; Local Colleges including QVCC, UCONN, ECSU, and Yale are potential sources for interns. Need to increase staff to complete work.

**Threats** Many staff members will be eligible for retirement within 10 years. High reliance on grant funds. Time dedicated to writing grants is time lost for delivery of services and new grant income will increase staffing requirements. Grant funding opportunities continue to decrease. Rising costs including health insurance and utilities. Regionalization of services may reduce local control and decrease opportunities for grant funding. Public Health Code violations remain high and the costs are not covered. Sub-standard housing poses health and safety risks. Unfunded or insufficiently funded State mandates. We need to identify and focus on priorities - not stretch staff beyond capacity.

# Our Values

**Community** Protecting the health of the people and environment of northeast CT is our number one priority. We care for our community and public health system partners with a great deal of respect, and consider them friends and neighbors.

**Trust** We have spent many years earning your trust as a dependable, credible, and reliable community partner. We are there when you need us.

**Accountability** We work hard to be an excellent responsible steward of public resources; delivering quality programs and services in a timely manner at a good value.

**Peace of Mind** Public health programs promote conditions that assist you in achieving a safe and healthy life.

**Ethics** We recognize our responsibility to treat all people fairly; enforce public health laws consistently; and foster health equity by educating diverse groups.

**Expertise** We set high standards for our work and our workforce, continually learning and growing in our capacity to deliver essential public health services to all.

# Strategic Plan

## Mission, Vision, Values, Goals and Objectives

### Our Mission:

The Northeast District Department of Health will, through community partnerships, promote, protect, and improve health in northeast Connecticut by monitoring health concerns, preventing illness, and encouraging healthy lifestyles.

### Our Vision:

Healthy people engaged in creating a thriving community

### Our Values:

Community • Trust • Accountability  
Ethics • Expertise • Peace of Mind

## Strategic Goals and Objectives

### *Goal 1: Protect and Promote Health and Well-Being by Delivering Excellent Services*

#### Objectives:

1. Timely and accurate regulatory services
2. Relevant and responsive community health promotion programs
3. Ensure delivery of critical services during events of public health concern
4. Implement a performance management system

### *Goal 2. Workforce Development Plans Are Utilized to Maintain a Highly Qualified Workforce*

#### Objectives:

1. Establish training programs and schedules to ensure timely training of staff
2. Adopt and implement an employee evaluation program
3. Adopt and implement an employee satisfaction survey
4. Update NDDH Workforce Development Plan

### *Goal 3. Information Technology Improves Service Delivery*

#### Objectives:

1. Assess, prioritize and implement information technology solutions
2. Increase Online services
3. Revise Information Technology Plan

Activities, responsibilities, outcomes, and timeframes are described in the 2020-2024 Workplan.