

# Vision

Healthy individuals and families thriving in a clean and safe community.

# Mission

To assess, promote and protect the public health needs of our community, enhance the quality of our environment and assure access to appropriate services delivered by a professional staff dedicated to excellence and innovation.

The Weber-Morgan Health Department strives to afford everyone an equally fair and just opportunity to obtain their highest level of health and identify and eliminate disparities.

# **Values**

**Access:** Community access, resilience, and education is achieved when everyone has a fair and just opportunity to attain their highest level of health.

**Accountability:** We keep our commitments and are responsible for our actions; we hold others to these same standards.

**Communication:** We engage in open and honest dialogues between, among, and with our employees, community partners, and clients.

**Customer Service:** We seek to help both external and internal clients by understanding their needs, providing effective problem solving, and delivering meaningful solutions.

**Dedication:** We are committed to protecting and enhancing wellness, healthy lifestyles, and a safe and clean environment.

**Empowerment:** We empower employees and residents to make educated choices and become engaged stewards.

**Proactivity:** We are a health department in motion with a clear vision for the current and future needs of our residents.

**Professionalism:** We deliver courteous, prompt, and culturally sensitive customer service.

**Respect:** We embrace the diversity of families and individuals.

**Sound Practice:** We deliver public health services based on science-based decision making and community needs.

**Teamwork:** We value supportive partnerships with public and private entities throughout the community, with our employees, and with our clients.





# **ABOUT THIS PLAN**

This strategic plan marks both a beginning and an end. It is the result of months of coalition building and soliciting input from the board of health, elected officials, community partners and our residents with an eye toward continuous improvement. It has become a compilation of ideas received from our community, meshed with the expertise and experience of our knowledgeable staff.

This plan is an action plan where every member of our staff can contribute as we work toward meeting our vision for creating a place where "Healthy individuals and families can thrive in a clean and safe community."

Our previous planning cycle was grievously disrupted by the COVID-10 Pandemic. Still, I'm proud to say we achieved many of our goals. We created a space for our growing Community Health staff and finished a home office in Morgan County. We improved our electronic record keeping and security by implementing systems more adaptable for our patrons as well as our staff and enabling us to take many of our services out into the community. Our Main Building and fleet vehicles became more energy efficient, and our audio-visual capabilities were greatly enhanced. We added data and quality improvement specialists. We worked with our partners to update our Community Health Assessment and Community Health Improvement Plans and expanded our capacity to address the social determinants of health needs in our communities.

Along the way, the membership of our Leadership Team completely turned over. You'll see their new ideas encapsulated in the goals that follow.

My sincere gratitude to everyone who has participated in this process, and to those whose dedication and good work it will take to keep this momentum going.

# How to Read this Plan

Each goal is organized into three different levels.

- 1. Strategic Priority: "What" we want to accomplish. Each goal is supported by at least one objective and strategy.
  - **1a. Objective:** "How" we are doing this. Each objective is specific to how we will achieve each goal and will serve as a measure of progress toward each goal.
    - **1a.1 Strategy:** "What" we are doing. Each strategy details what steps we are taking to meet each objective.

# **Table of Contents**

This strategic plan outlines four strategic priorities.

Department Mission, Vision, and Values	Pg.2
About the Plan - Message from Brian Cowan	Pg.3
Strategic Priority #1	Pg.5
Strategic Priority #2	Pg.8
Strategic Priority #3	Pg.11
Strategic Priority #4	Pg.12
The 10 Essential Public Health Services	Pg.14
Results Timeline	Pg.15

# **PRIORITIES**

# STRATEGIC PRIORITY#1: EFFICIENT AND HIGH-QUALITY SERVICES

#### **OBJECTIVE 1A:**

Improve operations by evaluating staffing, space, and funding to meet public health needs as population continues to grow in Weber and Morgan counties.

#### STRATEGIES 1A.1

Assess space on WMHD campuses to allow for future needs of the health department.

Responsible: Administration

- Track and record services from each division being utilized on a monthly basis.
- Annually, compile and evaluate data to identify trends and needs for changes in department facilities. Meet regularly with division directors to discuss plans based on results.

# STRATEGIES 1A.2

Work with state and local stakeholders to advocate for a consistent level of funding that meets public health needs.

Responsible: Health Officer and Relevant Staff

- Ensure market competitiveness for all health department employees by reevaluating all department positions through a market survey analysis every two years.
- Health Officer will continue to share funding information and operations requirements with county officials and affiliate groups.
- Annually, work with county partners to evaluate and advocate for consistent levels of tax funding by





8/30/2027

- presenting tax level history and needs assessments to county officials during budgeting season.
- Every year, prior to the legislative session, through the UALHD, work with stakeholders to advocate for a permanent minimum level of per capita funding identified at a State level for county health department services.

#### **OBJECTIVE 1B:**

Improve communication of department priorities by utilizing established and approved plans during planning, implementation, and reporting activities.

#### STRATEGIES 1B.1

Use the Strategic Plan, Workforce Development Plan, Performance Management System and Quality Improvement Plan on a continual basis.

Responsible: Leadership Team

- Leadership will review plans as agenda items monthly. The Board of Health, community partners and general staff will be updated on progress as needed.
- On a biannual basis, update employees of progress on the WMHD Strategic Plan at division and general staff meetings.
- Divisions will reference and incorporate department plan objectives into yearly division goals.
- Utilize health department branding and logos in all online and public outreach.
- By the end of 2024, create a Performance Management platform to measure and demonstrate division goal progress.

# **OBJECTIVE 1C:**

Utilize energy-reducing and cost-effective management principles of operation

# STRATEGIES 1C.1

Establish the Weber-Morgan Health Department as a leader in the community in energy-reducing and cost-effective facility management using principles of sustainability.

Responsible: Administration and Facility Operations



TARGET DATE

12/31/2024



- By December 2024, have Rocky Mountain Power evaluate the property for solar panel installation.
- Throughout 2025, seek out grant funding sources for solar panel installation at the WMHD main building.
- Prioritize charging station placement as we work with Weber County during the Fall 2025 block construction.
- Coordinate with a local landscaping architect to evaluate the WMHD Ogden campus landscape for aesthetics and smart water use by December 2025.
- Track landscape upgrades and wise water use and present findings annually to leadership by the end of the second quarter for budgeting purposes.
- By December 2026, develop a plan for reinvesting cost savings into facilities.

#### **OBJECTIVE 1D:**

Partner with Weber County IT department to improve communication and processes.

### STRATEGIES 1D.1

Responsible: All Divisions, Admin/Billing

- Evaluate current hardware and software needs on an ongoing basis.
- Create an inventory list by the end of 2024.
- Annually, review and maintain an inventory list of services, products, and paid third-party services to identify use, cost, relevance, and redundancy between departments.
- Coordinate quarterly standing meetings with Weber County IT to discuss IT ticket follow up, services, customer service, emergency preparedness, etc.
- Invite IT to present during general staff meeting once a year. Potential topics include software training, support, knowledge, equipment, and security issues.



TARGET DATE

12/29/2028

# STRATEGIC PRIORITY#2: IMPROVING INTERNAL COMMUNICATIONS

#### **OBJECTIVE 2A:**

Break down internal department silos and build upon our foundation of respect, trust, and equality among staff and all divisions

#### STRATEGIES 2A.1

Ensure a strong Leadership and Management Team in the health department through purposeful trainings and including team members on department-wide initiatives.

Responsible: Executive Director and Leadership Team

- Continually develop department goals and training that ensure staffing roles and responsibilities can be carried out by at least two people.
- Twice annually, the Health Officer facilitates identification of training priorities for Leadership and Management Team (i.e. value-based training, traumainformed, outward mindset, resiliency, leadership, new hire orientations, personnel management, public speaking, etc.).
- Provide opportunities for staff to participate in committees including: QI Council, Health Equity Team, Employee Recognition, Rapid Response, and Epi Team.
- To advance a culture of quality and performance management, staff that attend trainings may be asked to present on what they learned during the conference/training during monthly division staff meetings.
- Once a year, conduct a training needs assessment to ensure that performance gaps are addressed.



TARGET DATE

12/29/2028

# STRATEGIES 2A.2

Enhance communication across all staff so information flows efficiently. Responsible: Leadership team, PIO, Rapid Response Team

- At a minimum of once per year, Emergency Services, WIC, Nursing, Environmental Health, Community Health or Administration, Public Information will present at general staff meetings, highlighting interdepartment collaborations, special projects, and programs.
- Division and Department goals are distributed to staff yearly through staff meetings.
- Survey staff at general staff meetings for preference for department updates.
- Provide suggestion boxes (physical or digital) for staff to submit questions and create a standing agenda item in general staff meeting for responses.
- Suggestions received that are pertinent to the entire staff may be addressed during a general staff meeting.

# STRATEGIES 2A.3

Continually seek feedback from staff and partners.

Responsible: QI/PM Coordinator and Leadership

- Annually, evaluate public feedback from the WMHD website. As comments are received, they will be sent to applicable divisions.
- Analyze partner feedback from annual partner survey distributed each November.
- Evaluate WMHD employee feedback from annual PH WINS (Public Health Workforce Interests and Needs) Survey distributed each September.
- Update Strategic Plan with feedback from WMHD employees, partners, and the public by Quarter 1 of the following year.



TARGET DATE

4/30/2026



TARGET DATE

12/1/2025

# **OBJECTIVE 2B:**

Develop a culture of emergency response preparedness across all divisions.

#### STRATEGIES 2B.1

Prepare staff and stakeholders to respond to a public health emergency.

Responsible: Emergency Services and Division Leadership

- On a continuous basis, Emergency Services will support Division Leadership to help educate the Board of Health on WMHD's roles during emergencies using the annual training meeting and available online training.
- Yearly, Emergency Services staff will present a Board of Health ICS Training on public health's role in various disasters.
- Emergency Services staff will provide BeRAD and other mandatory training every other year per Division Leadership direction.
- Emergency Services will engage in monthly meeting with jurisdictional partners to work through the Homeland Security Exercise and Evaluation Program (HSEEP) and build a full-scale "Mass" or "Surge" exercise in 2025.
- Emergency Services will work with the Executive Director craft a Memorandum of Understanding (MOUs) including but not limited to Information Technology (equipment and bandwidth), Human Resources (hiring and purchasing), and Public Information (call center, staff to support, bandwidth).



#### TARGET DATE

12/31/2025

Working on various exercises to full scale exercises

# STRATEGIC PRIORITY#3: PARTNER COLLABORATION

#### **OBJECTIVE 3A:**

Using public health principles with a focus on the department's community health improvement plan, address emerging issues through community partnerships.

#### STRATEGIES 3A.1

Be a leader in our community health and improvement planning, by updating the WMHD CHIP alongside stakeholder groups.

Responsible: Leadership Team, Community Partners and Staff as Assigned

- By December 2024, work collaboratively with ongoing community coalitions to develop the 2024-2029 CHIP by addressing voted-on health priorities including Mental Health, Substance Use and Misuse, Chronic Diseases and Obesity.
- WMHD subject matter experts will attend Ogden CAN's Health network meetings where progress in committees, goals and objectives will be discussed.
- In collaboration with Ogden CAN, an annual review of progress made in implementing strategies and objectives set in the CHIP will be made available in an annual report.
- After a bi-annual review, potential revisions will be discussed by WMHD and community partners based on completed objectives, emerging health issues, changes in resources/assets, etc.
- Utilize Performance Management software to track CHIP progress. Assess and present progress report annually.



TARGET DATE

1/30/2026



# STRATEGIES 3A.2

Utilize the WMHD Epi-Team to develop strategies of disease surveillance and messaging to the community.

Responsible: Leadership Team, Epi Team, Nursing

- An Epi team meeting will be held regularly to discuss hotspots and emerging trends. Information including food recalls, rabies/animal vectors, etc., will be shared with additional staff and community partners as needed.
- Provide opportunities for staff to be invited to attend the Epi team. Communicate trends and findings to partners and public through online dashboards, professional communication and social media.

# STRATEGIC PRIORITY#4: PUBLIC TRUST

#### **OBJECTIVE 4A:**

Create a WMHD-wide process to ensure plans and strategies are in alignment with community partners



# TARGET DATE

• 1/30/2026

# STRATEGIES 4A.1

Collaborate with partners to synergize efforts to improve the community's health.

Responsible: Leadership Team

- Upon completion, update WMHD Strategic Plan in conjunction with the Community Health Improvement Plan (CHIP). Analyze data from interventions and determine course of action for ongoing health priorities.
- Annually visit at least five partners/agencies per year to align strategies and ensure that resources are being appropriately used in the community.

# **OBJECTIVE 4B:**

Operate under Public Health Accreditation Board (PHAB) requirement regardless of accreditation.

# STRATEGIES 4B.1

Integrate PHAB standards and measures into all department operations.

Responsible: Leadership under direction of the Health Officer

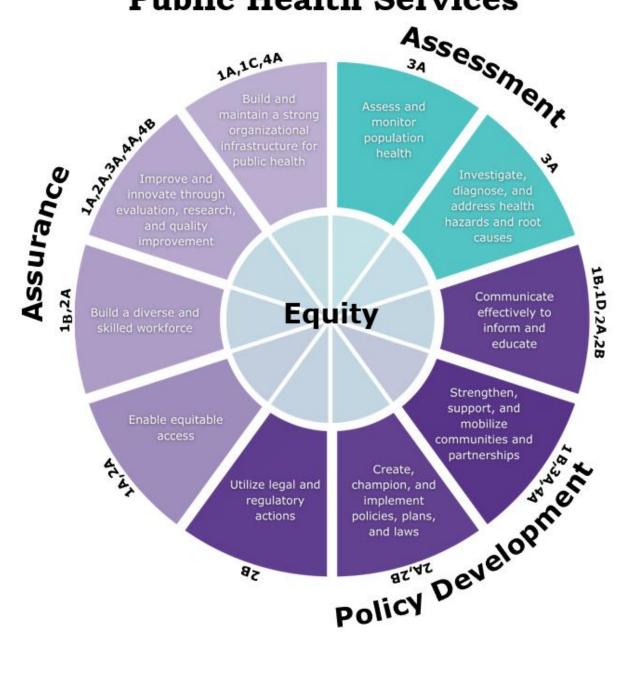
- By the end of December 2024, the Weber-Morgan Health Department will have completed its new Strategic Plan, Workforce Development Plan, Performance Management System and Quality Improvement Plan.
- By the end of the first quarter 2025, engage in the PHAB Readiness Assessment and PHAB Accreditation Trainings.
- By the end of the second quarter of 2025, WMHD will report back to the Board of Health the results of the PHAB Readiness Assessment.



TARGET DATE

• 5/30/2025

# The 10 Essential Public Health Services



# RESULTS TIMELINE

Below are the results of the previous 5-year goals. We use them to show and how they paved the way for our current goals.

2020	2021	2022	2023		2024		
A U G U S T Implementation of Weber-Morgan Health Department Board of Health immunization policy for pre-k, elementary, and secondary institutions  D E C E M B E R  BeRAD preparedness tool being used by Weber- Morgan Health Department staff and new employees for training	A request for proposals was issued to hire a contractor to finish the second floor of the health department annex building	APRIL Completion of Health Department Annex Building	JANUARY Increase of emissions compliance fee approved  FEBRUARY CHA realigned and updated post-COVID  AUGUST Board approved plans to move forward with PHAB readiness assessment  AUGUST Updated community-wide suicide response plan with community partners	SEPTEMBER Staff participated in Workforce Development Plan (PH WINS) survey  NOVEMBER Conducted a new SWOT Analysis  DECEMBER New electronic billing system implemented across the department	JANUARY New online customer feedback survey added to the WMHD website		