



CCHD/CHCC Strategic Plan - FY 2012 through FY 2015

Goal	Objective	Strategy	Responsible Party	Timeline	
Access to Health Care	Expand the scope of the CHCC	Build relationship with Rescue Mission			
		Apply for homeless grants when announced			
	Provide Prenatal/OB-GYN/Pediatric care at the CHCC	Fill physician vacancy with OB/GYN, Pediatrician			
		Continue to apply for grant funds			
	Improve access to dental services for Medicaid children and uninsured adults	Provide dental sealants for all school age children			
		Reach out to the local Dental Foundation			
		Develop a Community Dental Sealants Day			
	Obesity	Establish agency policy on healthier food choices for meetings/other agency events	Develop a policy		
			Gain Cascade County leadership buy in		
Stock juice in pop machine					
Establish a comprehensive and robust workplace wellness program at CCHD/CHCC		Support NAPA efforts in CCHD/CHCC			
		Encourage participation and incentives			
		On-site agency wellness committee with leadership support and buy in			
		Have a fitness center on site			
		Establish regular walking groups			

Substance Abuse	Store clerk training on laws	Coordinate with DUI Taskforce to create policy change at City and County levels		
		Resolution requiring store owners to complete training		
	Commitment to following strict guidelines for pain management of CHCC patients	Quality assurance review of patients on pain medications and pain contracts		
		Implement internal tracking process to identify patients with chronic pain		
		QA provider prescribing of controlled substances		
		Enroll in prescription drug registry		
	Establish substance abuse treatment opportunities for CHCC patients	Seek funding for onsite treatment program		

Environmental Health	Ensure safety in school playgrounds, labs, shops, idling zones, etc.	Educate Board of Health, County and City Commissions		
		Pass a City/County Ordinance		
		Increase Environmental Health staff resources and training		
		Document and track the need		
	Require Person-in-Charge training in food establishments (PHAB Standard 5.1B, 6.1B, 6.2 B)	Educate Board of Health, County and City Commissions		
		Pass a City/County Ordinance		
	Conduct Ground Water/Drinking Water Public Education and Study	Educate Board of Health, County and City Commissions		
		Pass a City/County Ordinance		
		Increase Environmental Health staff resources and training		
		Document and track the need		
	Improve foodborne illness tracking and surveillance	Establish foodborne illness tracking methods		
		Work to increase sampling of potential foodborne illness cases		
Continue Epi training of EH and CD staff				
Family Services	Offer Parents as Teachers/Lactation Consultations to general public	Investigate implementing a paid for service program to the community.		

Enhance Agency Wide Operations	Increase operational efficiency, including patient and client flow	Conduct workflow analysis		
		Implement recommended changes		
	Conduct and encourage staff professional and organizational development and succession planning with internal employees	Advocate for training dollars in every budget		
		Actively identify staff with Leadership potential		
		Work with HR to develop opportunities for staff		
		Assist staff with establishing goals for future		
		Continue team building and organizational culture of professional development		
	Achieve Public Health and CHCC Accreditation	Implement Quality Improvement processes in all programs		
		Implement Patient Centered Medical Home		
		Implement dash board measurements and track to increase financial stability		
		Implement meaningful use indicators- Practice Analytics		
		Identify and measure performance indicators for staff		
	Complete Policy, Procedure, and Task Project	Commitment from leadership to set schedule and follow it.		
	Reinstitute Annual Report of CCHD/CHCC programs	Identify internal annual measures for tracking aligned with accreditation		
		Continue to build infrastructure for documenting what we do		
	Ensure adequate funding for public health functions	Identify Environmental Health gaps and staffing resource needs		