

Strategic Plan for Louisville Metro Public Health and Wellness 2019-2021



Vision: A healthy Louisville where everyone and every community thrives.

Mission: To achieve health equity and improve the health and well-being of all Louisville residents and visitors.

Values: Collaboration, Innovation, Grit, Integrity, Quality

City Values: *Life-Long Learning, Compassion and Health*

Fischer Team Values: *Integrity and Transparency, Trust and Respect for All, Teamwork and Partnerships, Improvement and Innovation, Positive People Living to Full Potential in a Healthy and Resilient Community, Sense of Urgency*

Themes: LMPHW strategic plan focus areas.

Theme	Definitions
Cultivate professional excellence	Workforce development, capacity building, HR and personnel processes, employee engagement
Enhance timely and actionable data	Quality improvement, program evaluation, epidemiology, data sharing/data governance
Provide bold public health leadership	Translational research, policy advocacy, PHAB accreditation, racial equity plan
Strengthen strategic engagement	Partnerships with other LMG agencies, and stakeholders; empowering residents
Ensure flexible and sustainable funding	Revenue generation, billing, grant funding, new funding models

Mayoral Goals: Help our Citizens Get Healthy

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Cultivate professional excellence

Goal #1: Implement an organizational workforce development plan for LMPHW staff by June 2019

Goal Owner: Admin division

What	Who	Why	When	Check-Step	Resources
Determine evidenced-based best practices for workforce development	Admin	Ensure evidence basis	March 30 2019	Adequate evidence to ensure the following are met: equitable access to higher education; increased and equitable opportunities for personal growth, training, development and upward career mobility	Staff time
Draft WFD plan and implementation plan	Admin	Gather feedback	Apr 30 2019	Completed plan draft	Staff time
Staff and leadership review	Director's team with feedback from all staff	Obtain buy-in	May 30 2019	Revised plan draft with feedback	Staff time
Final WFD and implementation plan	Admin with feedback from all staff	Roll out and operationalize	June 30 2019	Completed approved plans and ready to commence implementation	Staff time*

**Components of the workforce development plan may require additional financial resources*

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Cultivate professional excellence

Goal #2: Complete capital projects to ensure that LMPHW resource capacity is comparable to peer cities by June 2021 (capital project delivery)

Goal Owner: Admin

What	Who	Why	When	Check-Step	Resources
Identify peer cities to benchmark	Admin	Measure ourselves against evidence-based methods	July 2019	Vetted list of peer cities	Staff Time
Inventory all facilities for defects and issues	Director's Team & Facilities	To ascertain which areas, require extra work and greater resources. Note non ADA compliant facilities and needed changes.	July 2019	Obtain full list of categorized issues and problems in all facilities.	Staff Time
Create a prioritized list for capital improvement projects	Sr. Directors with all staff input	To ensure timely and efficient use of resources towards attaining goals while also demonstrating a timeline to stakeholders	September 2019	Finished list with support from relevant stakeholder approval.	Staff Time
Research projects to determine cost and feasibility	Admin & Facilities	In order to make the best and most cost-effective decisions	November 2019	Categorized list of actionable projects.	Staff Time
Begin work on projects.	Admin with division leaders as appropriate	Catalyzing efforts to progress towards our 2023 goal of being comparable to peer cities.	July 1, 2020	Completed evaluations and obtained suitable resources for project.	Staff Time + resources allocated to projects

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Cultivate professional excellence

Goal #3: Implement recruiting and employee development standards by December 2019.

Goal Owner: Admin

What	Who	Why	When	Check-Step	Resources
Create workgroup to analyze and recommend standards for the interviewing process	Team consisting of a mix of executive team and front line staff	Incorporating multiple view points for feedback in the hiring process will allow for a holistic understanding of what is needed in order to hire the best candidates for positions.	March 2019	Final approved standards; 100% of interviews are conducted according to standard	Staff Time
Review interview process and solicit feedback from hiring managers in LMPHW on methods for standardizing.	Executive team with input from all staff	In order to incorporate our message of equity in all practices while simultaneously streamlining the hiring process, cultivating a shared vision for LMPHW employees	April 2019	Adopt a protocol for standardization.	Staff Time
Create a process for all employees to have a workplan developed with their supervisors, and reviewed at annual performance appraisals	Directors and admins	In order to give clearly defined roles to all employees, providing greater structure and easing burdens /confusions.	December 2019	50% of LMPHW positions have a workplan on file by June 2019; 100% of LMPHW positions have a workplan on file by December 2019.	Staff Time

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Cultivate professional excellence

Goal #4: Improve the health and wellbeing of employees 10% by 2020 and 20% by 2021.

Goal Owner: Admin

What	Who	Why	When	Check-Step	Resources
Survey staff to set baseline health-related quality of life metrics (Using standard CDC question set).	Employee engagement team	Create a baseline, with repeated annual measures	March – May 2019	Completed survey	Staff time, use of SurveyMonkey or other survey tool.
Using a PDCA approach, implement projects to respond to employee driven feedback (e.g., employee engagement committee goals; OWLS culture change)	Lead by Admin/Directors team; with input from staff	Use a systematic approach to increasing employee engagement to improve retention, productivity, employee health, etc.	March 2019	Full PDCA cycle completed	Staff time and payments to contractors as needed (OWLS); other project investments
Monitor KPIs and evaluate employee's satisfaction with the plan.	Admin/Directors Team	Determine changes and adaptations if needed	Ongoing with annual revaluations	Completed annual evaluation	

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Cultivate professional excellence

Goal #5: Increase LMPHW’s capacity for emergency response by upgrading and maintaining program components by December 2019.

Goal Owner: Emergency Preparedness/Operations

What	Who	Why	When	Check-Step	Resources
Administer public health training to all employees and relevant stakeholders.	Emergency preparedness	Increase capacity and readiness to respond to emergencies.	Ongoing starting in April 2019	Training and information made available for 100% staff and necessary stakeholders.	Staff Time + cost for hosting training if applicable
Develop and implement plan for maintaining readiness of fleet and logistics to rapidly deploy in emergencies or disasters.	Emergency preparedness	To maintain adequate services necessary for response and mitigation.	August 2019	Plan created and made accessible.	Staff Time
Develop and conduct annual updates to the public health emergency operations plan.	QIC, Admins, emergency response leaders in LMPHW	Maintain excellence in services provided, identify shortcomings.	November 2019	Annual meeting to review and update plans.	Staff Time

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Enhance timely and actionable data

Goal #6: Promote a culture of Quality Improvement to assure excellent service delivery by implementing the LMPHW QI plan by January 2020.

Goal Owner: Center for Health Equity, Quality Improvement Team

What	Who	Why	When	Check-Step	Resources
Build QI goals or activities into each program area where missing.	Quality improvement team (staff from operations and CHE)	Ensuring QI standards are a part of all division activities.	January 2019	Programs have clear QI goals and improvement strategies are integrated into programs.	Staff Time
Convene a quarterly QI team to share training, progress on projects and identify areas of collaboration	QI Coordinators	Update department employees to provide a way for integrated services and efficiency.	February 2019	Hold and document 4 informative QI team meetings per year.	Staff Time
Ensure all programs are reporting meaningful KPIs into the VMSG system	LMPHW Exec team	To measure progress towards program goals and identify areas where QI is needed.	March 2019	Relevant KPIs for each program created with VMSG.	Staff Time
Establish a process for internal audits for clinical and operational services	Health Ops	Assure quality and identify areas in need of improvement	March 2019	Audit protocol created and implemented.	Staff Time
Report on QI activities in the LMPHW annual reports to PHAB and the public	LMPHW Exec team	Allows for the full scope of progress and setbacks to be seen on a wide scale in an easily understood format.	June 2019	Measurable QI activities documented and reported.	Staff Time
Evaluate and update the LMPHW QI plan annually	QI Coordinators	Adapt to the changing needs of LMPHW.	Jan 2020* and annually thereafter	QI plan successfully reviewed by team and updated every year. *Note 2019's plan is already in place	Staff Time

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Enhance timely and actionable data

Goal #7: Develop standardized data – starting with gender inclusivity as pilot by June 2019.

Goal Owner: Social Cultural Capital Root Cause Team

What	Who	Why	When	Check-Step	Resources
Train LMPHW staff around new data standardization policy developed by the Data Governance Committee and adopted by LLT.	LMPHW Data Team, DoIT	Training on why/how to standardize.	February 2019	All relevant staff have received training.	Staff Time
Adapt forms to reflect new policy	LMPHW Data Team, health operations staff	Adopt LMG policy	February 2019	Identify and adapt forms	Staff Time
Update databases that correspond to updated forms	LMPHW Data Team	Adopt LMG policy	June 2019	All LMPHW databases updated with gender inclusive language.	Staff Time
Evaluate efficacy of process and roll out for other demographic data collection.	LMPHW Data Team, Directors, Admins, input from all staff using forms	Continuous quality improvement	June 2019	Report on details regarding success of project and suggest new inclusive data points.	Staff Time

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Enhance timely and actionable data

Goal #8: Expand program evaluation by ensuring every program has an evaluation component by December 2019

Goal Owner: Center for Health Equity – Epidemiologists and Academic Health Coordinator (AHC)

What	Who	Why	When	Check-Step	Resources
Review each program and determine the scope of evaluation.	CHE epidemiologists	Set scope of work	April 2019	Each program has a completed logic model.	Staff Time
Identify programs that lack some form of process and outcome evaluation, develop priority list of programs to work with	CHE epidemiologists	Set scope of work	May 2019	Prioritized list of programs	Staff Time
Collaborate with program staff (front line and up) to establish evaluation periodicity, benchmarks, process for completing, etc.	AHC, CHE epidemiologists, program staff	Including staff to create a positive feedback loop in the process of evaluation	April-December 2019	All programs have adequate process and outcome evaluations as identified in the priority list.	Staff Time (May include outside evaluation consulting if needed)
Enhance capacity for policy evaluation	CHE epidemiologists; CHM; Academic health coordinator	Improve continuous quality improvement in policy advocacy and allow for measurement of impact	December 2019-February 2020	Completed trainings, creation of evaluation tools, etc.	Funding for training
Monitor programs to ensure evaluations are complete, identify issues or resource gaps as they appear and problem-solve solutions	AHC, CHE epidemiologists, program staff	To ensure the evaluations are completed and any issues are addressed that may prevent successful evaluations	Jan 2020-Dec 2021	All programs complete evaluations	Staff time (May include outside evaluation consulting if needed)

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Enhance timely and actionable data

Goal #9: Create a comprehensive opioid surveillance program by February 2020

Goal Owner: Communicable Disease Supervisor, Center for Health Equity Epidemiologists

What	Who	Why	When	Check-Step	Resources
Convene workgroup with EMS, Coroner's office, LMPD and other independent city emergency services to create a data sharing plan	LMPHW Director	Determine needs for shared data systems	March 2019	Meeting schedule established	Staff time *
Develop and implement data sharing agreements	Epidemiologists	Set a data standard	July 2019	Agreed upon standards for data that will be shared and formats	Staff time, may need external resources for data system or technical assistance
Implement a shared data system	Epidemiologists; DoIT/Health IT	Create a platform for sharing data	December 2019	Live platform for data sharing	Staff time, may need additional resources for data system or technical assistance
Develop shared reporting and response plans	LMPHW Director; Regional Epidemiologist; health operations clinical staff	Determine what response actions are needed and how the data will be shared with the public and/or other entities	February 2020	Response and reporting plans in place	Staff time
*LMPHW also intends to apply for a grant from the CDC to support this work.					

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Provide bold public health leadership

Goal #10: Lead by example by enacting a racial equity action plan by 2020.

Goal Owner: Center for Health Equity Team, Racial Equity Liaisons, Admin

What	Who	Why	When	Check-Step	Resources
Create Project Charter	CHE Admin	Start to organize process and create a team.	January 2019- February 2019	Completed project charter.	Staff Time
Review internal policies and evaluate for equity	Departmental Racial Equity Liaisons	Set scope of work	March- May 2019	Report on racial equity reflected in current policies and shortcomings of internal policies around racial equity.	Staff Time
Create an LMPHW Internal Communication Plan	Communications, Racial Equity Liaison	Communicate the intent and plan.	May 2019	Completed communications plan	Staff time
Hold workgroup to revise current policies or enact new policies as needed	Staff, QI Team, Racial Equity Liaisons	Incorporating equity in the building blocks of the process by involving staff to give feedback.	June- November 2019	Multiple focus groups conducted to review reported racial equity shortcomings and successes of policies, accepting input around furthering racial equity goals.	Staff Time, funding to support focus groups
Implement outcomes evaluation.	QIC team	Measure the effectiveness of implemented plans.	December 2019- December 2020.	Report on efficacy of implemented racial equity action plan and reception of plan.	Staff Time

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Provide bold public health leadership

Goal #11: Receive PHAB reaccreditation in 2021.

Goal Owner: PHAB Accreditation Coordinator (AC)

What	Who	Why	When	Check-Step	Resources
Training for LMPHW exec team on reaccreditation standards and expectations	AC & LMPHW Communications team	Ensure reaccreditation standards are met; create internal communications to inform staff	August 2019	Executive team training held explaining PHAB reaccreditation expectations.	Staff Time
Convene workgroup or domain teams	AC	Workgroups will be able to have a structured environment for the PHAB reaccreditation process.	October 2019	Comprehensive workgroups held for PHAB requirements.	Staff Time
Annual review of domain requirements and collection of documents or narrative summaries	AC & teams consisting of operations and CHE staff	In order to maintain an ongoing process of info gathering.	Annual through 2021	Team review of documents assuring PHAB reaccreditation documents are kept up to date.	Staff Time
Maintain satisfactory annual reports	AC, Dept Director	Meets PHAB requirements; ensures LMPHW is compliant with standards	Annual through 2021	Publish annual PHAB compliant reports.	Staff Time

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Provide bold public health leadership

Goal #12: Build a better public health environment with lawmakers through collaboration and education by 2020.

Goal Owner: CHE -- Community Health Manager (CHM) for Strategic Engagement Team

What	Who	Why	When	Check-Step	Resources
Complete Chief Public Health Strategist training for all members of Metro Council	LMPHW Director	Educating Metro Council members around public health goals will aid in the creation and promotion of policies benefitting public health.	July – September 2019	All Metro Council members attend strategy training.	Staff Time
Develop a 3-year legislative priorities and implementation plan	CHM and QI	Determine key public health issues, determine a process by which LMPHW recommends policy change, and ongoing review of new/revised ordinances and laws that impact public health.	January – February 2019	Creation of plan	Staff time
Share results of engagement plan, lessons learned, etc. with other Local Health Departments through outreach or conference presentations	CHM and Policy Skillset team	Enhance the landscape of public health through sharing our story of implementing policy engagement.	January – March 2020	Creation of a presentation and white paper that can be adapted/shared with others.	Staff time

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Provide bold public health leadership

Goal #13: Measure and formalize LMPHW’s participation in public health research by 2020.

Goal Owner: CHE, Academic Health Coordinator

What	Who	Why	When	Check-Step	Resources
Reconvene the LMPHW research committee for bi-monthly meetings to identify, share, and collaborate on research	AHC; Research team consisting of operations and CHE staff	Provide oversight and collaboration for research activities.	January 2019	Monthly meetings set for LMPHW research committee.	Staff Time
Design database to capture details of all ongoing and planned research activities	LMPHW Data Team	Track ongoing/planned research activities	February 2019	Comprehensive database designed to increase ease of public health research.	Staff Time
Submit at least 1 abstract to APHA, NACCHO, APHL, CSTE and other national conferences identified by 2020 (or within the next conference cycle).	Admins, Directors, Supervisors; frontline staff contributing to research areas	Keeping LMPHW at the forefront of innovation, creating connections, increasing grant opportunities	August 2019 and annually through 2021	Abstracts submitted.	Staff Time + travel to conferences

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Strengthen Strategic Engagement

Goal #14: Publish Healthy Louisville 2025 and develop an implementation/monitoring plan by December 2019.

Goal Owner: CHE PHAB Accreditation Coordinator and Quality Improvement Coordinators

What	Who	Why	When	Check-Step	Resources
Convene community stakeholders to develop objectives for each of the 3 focus areas identified for HL 2025	QI Team	Gaining insight and feedback from community members to shape and drive HL 2025.	November 2018-March 2019	Stakeholders gathered on a regular basis for each focus area.	Staff time + event hosting and payment to consultant as needed
Create a structure for re-convening stakeholders to monitor progress on implementation & increasing community engagement in the process.	QI Team; LMPHW Communications team	Maintain feedback loop for community ensuring HL2025 remains relevant.	January 2019	Specific dates and goals set and sent out to give stakeholders direction.	Staff Time
Publish plan and Community Health Assessment reports (Community health needs assessment, public health system assessment, Forces of Change assessment)	QI Team, LMPHW Communications team	Report on findings, process and plan.	April 2019	HL2025 & Community Health Assessment published on new dashboard website.	Staff Time + annual cost of website
Create an internal communications plan for information dissemination	QI Team; LMPHW Communications team	To ensure all LMPHW staff understand the HL 2025 plan and how it will affect their work	January 2019	Established timeline and messages to send to employees	Staff time
First annual re-evaluation and revision	QI Team, Admins	Ensure HL2025 goals are met in a timely manner, adjusting for changes in community needs.	March 2020 (or 1 year post publication)*	Annual meeting to review HL2025 progress and relevance, adjust accordingly.	Staff Time + event hosting and payment to consultant as needed.
*Additional LMPHW goals may be created beginning in spring of 2020 based on identified ways to support Healthy Louisville 2025					

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Strengthen Strategic Engagement

Goal #15: Increase department capacity for grassroots engagement by completing a second participatory budgeting (PB) pilot.

Goal Owner: CHE Strategic Engagement Team

What	Who	Why	When	Check-Step	Resources
Evaluate lessons learned from initial PB engagement	CHE PB Team, QI Team, Admins	To document and learn from the process.	August 2019	Document lessons learned.	Staff Time
Focus groups and community education with pilot districts	PB Team	Help pilot districts get familiar with PB process and ensure feedback for most effective implementation.	August 2019	Held one focus group per neighborhood in pilot districts.	Staff Time
Create a project management plan for pilot	CHE PB Team	Provide structure for the PB process with lessons learned incorporated.	End of PB process*	Project management and structure provided.	Staff Time
Engage stakeholders and community members with LMPHW as a backbone agency for supporting PB work.	CHE PB Team, LMPHW Communications team	Increase the effectiveness of PB project.	Throughout PB process, during planning	Gain buy in from multiple sources for PB.	Staff Time
Re-evaluate and identify sustainability plan for institutionalizing PB in Metro budgeting processes.	QI Team, PB Team, Admins	Create a strategy for continuing PB.	End of PB process	Data-driven and evidence-based plan created and promoted.	Staff Time
Create community engagement plan for broader community and grassroots engagement in the department based on PB results	CHE Community Engagement Skillset lab; LMPHW Communications	To disseminate community information to other programs.	End of PB process		Staff Time
<i>*Timelines are in development, but this is anticipated to be a multi-year project.</i>					

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Strengthen Strategic Engagement

Goal #16: Improve Louisville Metro capabilities to respond to public health emergencies and disasters.

Goal Owner: Emergency preparedness

What	Who	Why	When	Check-Step	Resources
Update HVA (Hazard value analysis)	QI Team, Emergency Preparedness	To clearly document areas in need of improvement and gaps in coverage.	April 2019	Updated Hazard list	Staff Time
Develop collaborative planning and logistics support capability with partners	QI Team, Emergency Preparedness	Improve community-based response to emergencies	May 2019	Well attended meetings with partners. Interoperable equipment to support response	Staff Time
Improve Coordination with partners	QI Team, Emergency Preparedness	Understand our resource capabilities	June 2019	List partners and coordination events and identify available resources	Staff Time
Train and Exercise emergency response activities with partners and LMPHW	Emergency Preparedness	Provide greater emergency response capacity for LMPHW	June 2019	Documented training and exercise participating	Staff Time, external collaborators, CCs 821, 823, 875, 876
Evaluate training/plan to determine need for future initiatives/goals	Emergency preparedness	Ensure plan meets the needs of the community	July 2019-July 2020	Documented evaluations	Staff Time, external collaborators

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Strengthen Strategic Engagement

Goal #17: Implement cross functional initiatives to Improve collaboration with Metro agencies that govern processes (DoIT, HR, OMB) by June 2020.

Goal Owner: Admin; Operations

What	Who	Why	When	Check-Step	Resources
Identify differences in processes	QI Team	Root cause analysis	July 2019	Documentation of process variance.	LMPHW staff
Prioritize possible collaborative solutions	QI Team, Input from executive team staff and/or those affected	Set up an order to address needs and share best practices	September 2019	Identified processes in need of change ordered by urgency.	Staff Time, DoIT, OMB, OPI, etc.
Set processes and streamline goals	Executive team staff and/or those affected	Prioritizing resources	October 2019	Goals prioritized providing guidance in action planning.	Staff Time, DoIT, OMB, OPI, etc.
Implement changes & evaluate	Executive team staff and/or those affected	Streamlining communication and processes between collaborative agencies.	November 2019-April 2020	Highest priority processes streamlined between agencies.	Staff Time, DoIT, OMB, OPI, etc.

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Ensure flexible and sustainable funding

Goal #18: Improve billing processes to ensure accurate billing for clinical services by June 30 2020.

Goal Owner: Medical Director

What	Who	Why	When	Check-Step	Resources
Identify current billing methods and clinical service needs	Medical director; Director of Nursing	Determine current state	April 2019	Document billing methods and reported needs.	Staff Time
Find shortcomings in current billing processes for clinical services	Clinical services leadership team	Identify areas to address	June 2019	Identify types of shortcomings and evidence-based solutions for them.	Staff Time
Identify and advocate for sustainable billing models which maximize reimbursement for services	Clinical services leadership team	Find evidence based and data driven methods.	July-August 2019	Meeting with relevant parties to promote improvements.	Staff Time
Implement and review process	Clinical services leadership team; QI team	Continuous quality improvement	August 2019-June 2021	Feedback and changes after implementation to adjust improvements.	Staff Time

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Ensure flexible and sustainable funding

Goal #19: Research novel public health funding structures and partners to develop a flexible funding plan by June 30, 2020.

Goal Owner: Administrative division/Fiscal Administrator

What	Who	Why	When	Check-Step	Resources
Find models from comparable public health departments	Director's team	Finding established practices in order to adapt previous work to efficiently	January-April 2019	List of possible novel models LMPHW could utilize.	Staff Time, other public health departments and partners
Identify viability of alternative funding structures	Executive administrator; OMB liaison; Director's team	Ascertain capacity for LMPHW to engage in alternative funding plans.	April-July 2019	Categorize structures by LMPHW capacity.	Staff Time
Determine viability of re-engaging the Friends of Metro Public Health and Wellness as a non-profit arm of public health	Executive administrator	Determine whether this non-profit entity can be an active mechanism for fundraising and/or grant opportunities	June 2019 – June 2020	Feasibility assessment, implementation plan (i.e., new strategic plan goal) if feasible.	Staff time, Board of Health, may need outside technical assistance
Create action plan to transition or integrate other structures	Executive administrator; OMB liaison; Director's team	Provide framework.	July-October 2019	Framework with desired outcomes created.	Staff Time
Implement changes and review	Executive administrator; OMB liaison; Director's team	Flexible funding plan implementation.	November 2019-2021	Flexible funding plan followed with feedback integrated.	Staff Time

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