



Public Health
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Vermilion County Health Department Strategic Plan 2015-2020

Approved by Board of Health, November 10, 2015

VCHD Mission	The primary mission of the Vermilion County Health Department is improvement of the quality of life for all residents of Vermilion County, Illinois utilizing disease prevention, health protection and health promotion programs designed to provide a healthier life and environment through enhanced community collaboration, cooperation and communication.
Who We Serve	The Vermilion County Health Department serves the 81,000 residents of Vermilion County.
Our Programs and Services	The Vermilion County accomplishes its mission through the following programs: Vital Records Women, Infant and Children (WIC) Communicable Disease Control Program Immunization Program Tuberculosis Program Annual Seasonal Flu Project Environmental Health Division Food Service Sanitation Potable Water Supplies Private Sewage Disposal Vector Prevention and Pest Control Housing Program Solid Waste Nuisance Control Lead Poisoning Prevention Smoke Free Illinois Act Enforcement Emergency Planning and Preparedness Education Services for Students in Health Care Professions



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Our Goals 2015-2020	<ol style="list-style-type: none">1. Strengthen the economic sustainability of the Vermilion County Health Department (VCHD)2. Enhance communications, marketing and promotion of VCHD; Enhance community relations3. Address community needs through programming, services and education4. Maximize VCHD workforce capacity, efficiency and retention of employees5. Enhance Emergency Preparedness and response capabilities
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Background and Context

Local health departments in Illinois face many challenges and opportunities. The Vermilion County Board of Health along with key Vermilion County Health Department staff recently embarked on a strategic planning process to identify the challenges facing the health department and to capitalize on its strengths and opportunities. The Board of Health seeks to ensure ongoing viability and sustainability for the health department as the health department continues to serve the critical needs of the residents of Vermilion County.

Process

The Board of Health completed a SWOT analysis (see Appendix A-1.1, 1.2) to identify the Strengths, Weaknesses, Opportunities and Threats facing the Health Department. Board of Health members then ranked the top 5 issues in each category and goals and strategies were developed. The overall plan is designed to ensure the Vermilion County Health Department is well prepared for what comes next.

In addition, the Vermilion County Board Chairman has created an adhoc committee to develop a strategic plan (VC 2025) for the County as a whole and the VCHD Board wishes to ensure health department goals compliment the County's long term plans.



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Goal 1: Strengthen the economic sustainability of the Vermilion County Health Department

The State of Illinois fiscal crisis is an ongoing threat to many organizations, agencies and programs including local health departments (LHDs). LHDs have continued to see reductions in funding and reduced revenue streams over the last several years. VCHD seeks to monitor all areas of revenue that impacts its economic stability and sustainability.

Intervention Strategies:	Evaluation
a) Seek grant opportunities especially with community collaboration and partnerships	# of new grants added by 2016, 2018, 2020
b) Research non-grant funded revenue resources, including but not limited to, establishing a Health Department Foundation <ul style="list-style-type: none"> a. By June 2016 research barriers, identify requirements, etc.in establishing a VCHD Foundation 	# and type of any new revenue sources added
c) Monitor impact of Affordable Care Act (ACA) as potential revenue source	Annual & PRN Review of legislative changes related to ACA. Annual review of any revenue achieved related to ACA
d) Monitor and maximize billing efforts (especially as related to billing for immunizations)	Annual review of vaccine expenditure vs revenue
<ul style="list-style-type: none"> a. By Dec 2016 train at least 1 additional VCHD staff person to do insurance billing b. By Sept. 2016, assess need for addition of billing software (for billing insurance for immunizations, etc.) c. By Dec. 2016 explore vendors offering immunization billing software and cost of software 	Name and date of VCHD employee trained to do billing Need assessment report List of vendors and cost of billing software (if assessed as needed)
e) Advocate with County Board to eliminate rent by CFY 2016-17	Rent status; budget amendment or adjustment as needed

<p>f) Advocate with County Board to maximize full use of tax levy appropriated for health department by 2016-17</p>	<p>County Board office /Finance Committee discussions; County Board actions; Budget amendment or adjustment as needed</p>
<p>g) Advocate with State representatives and senators to improves funding of LHDs (i.e., increase Local Health Protection Grant funding)</p>	<p>IPHA advocacy effort outcomes VCHD advocacy efforts State of Illinois Budget LHPG line item increase</p>
<p>h) Review VCHD fee schedules: 1) Immunizations/ annually and as needed; 2) Environmental Health fees and Vital Record fees, minimum of every 3 years or sooner as needed</p>	<p>Annual cost analysis of Immunization fees Cost analysis of EH fees/ Vital Record fees every 3 years</p>
<p>i) Work with County Software OpenGov.com to provide timely, relevant fiscal data. VCHD Administrator and Financial Director registered users on OpenGov .com by October 2015</p>	<p>Data reports utilized for monthly budget reports and/or annual budget preparation</p>



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Goal 2: Enhance communications, marketing and promotion of VCHD; Enhance community relations

The Vermilion County Health Department, for almost 50 years, has quietly provided critical programs and services for the residents of Vermilion County. The nature of our work often requires dealing with private and protected information making it difficult to share what we do with the public and media due to confidentiality requirements. In addition, public health is about prevention efforts and “showing” prevention is often not appreciated or seen as “news worthy”. Public Health often only makes the news in a crisis situation. VCHD would like to take a more pro-active approach in promoting who we are and what we do. Our primary mission is to improve the quality of life for all residents of Vermilion County utilizing disease prevention, health protection and health promotion programs....through enhanced community collaborations, cooperation *and communication*.

Intervention Strategies:	Evaluation
a) Provide communication training (specifically how to deal with media) to VCHD Administration, Supervisors and key staff by July 2016	Date of training(s) provided; List of employees trained
b) Increase promotion of the Health Dept. via VCHD website, Facebook pages, Vermilion Advantage tab pages and other media	# “Likes” on FB pages for VCHD general FB page and WIC FB page # of Vermilion Advantage tab pages completed # of other media reports, stories, etc
a. Promote ongoing VCHD efforts at least quarterly (ongoing beginning October 2016)	# of press releases # of web page promotions # of community presentations
b. Celebrate key accomplishments including VCHD 50 year anniversary (July 2016)	# of press releases # of story promotions # in attendance at anniversary open house
c. Provide timely information during public health crisis events (ongoing)	# of press releases # media interview # of education sessions/documents

	posted or published
c) Ensure current media contact list and maintain ongoing media relationships	Annual Review (and prn) by PIO and/or Community Liaison of media contact list
d) Utilize Community Liaison (currently 25% staff position) and key staff to engage with community organizations	# of presentations # of community partner meetings attended



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Goal 3: Address community needs through programming, services and education

Vermilion County Health Department is required by the State of Illinois to complete a community assessment and develop a community plan to address identified needs as part of the health department's recertification process every 5 years. Many other community agencies including local hospitals are also required to complete a community assessment. There has been an ongoing effort over the last several years to identify a process to complete a community assessment that satisfies the requirements of the variety of agencies, organizations, and of the health department. Timing requirements by the state and accrediting bodies has made doing a single community assessment a challenge; hospitals are on a 3 year cycle, LHDs are on a 5 year cycle.

Due to the State fiscal crisis in 2010, VCHD lost 14 programs and 60% of staff. Community health needs did not go away but the capacity to address those needs were critically impacted. Some programs or parts of programs were picked up by other agencies and organizations within our community but there are still gaps in needed services to improve the health and quality of life of Vermilion County residents.

Intervention Strategies:	Evaluation
a) Enhance partnerships to complete the community assessment process that is required for LHDs and local hospitals. By Nov 2015, hire Regional Community Health Plan Coordinator through partnership with Presence, Carle, VCHD, CUPHD and United Way.	Employee hired date # of community meetings attended # of new work groups established Community Assessment reports
b) Complete IPLAN/VCHD certification process by Nov. 2017	VCHD Organizational Capacity completed by Spring 2017 # of internal and external IPLAN meetings; # of surveys completed, etc. by 2016-2017

IPLAN continued	Preliminary review of IPLAN submitted to State by Date Aug 2017 Submission of IPLAN to BOH by Date Sept 20, 2017 Submission to State by Sept 30, 2017 of final IPLAN and acceptance by State by Nov 2017
c) Add programs and services to address community needs as funding and resources allow Explore adding STD services (via urine testing by May 2016)	Date and type of new programs or services offered
d) Add Health Educator position by 2016-2017 to address identified community health needs	Name and date health educator hired



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Goal 4: Maximize VCHD workforce capacity, efficiency and retention of employees

VCHD currently has a staff of 27 employees. Loss of 60% of staff in 2010 has severely impacted any redundancy in program areas; staffing limitations has occasionally required reduction or limitation in the availability of the remaining service at the health department. A variety of issues constrains our ability to rebuild workforce capacity including the state fiscal crisis, reduction in grant funding, flat funding of the Local Health Protection, less competitive wages and continual reduction in other employee benefits.

In addition, VCHD has been experiencing a steady loss of long-term employees due to many reaching retirement age. This loss impacts “institutional knowledge” and reduces and threatens our expertise in many program areas.

Intervention Strategies:	Evaluation
a) Continue to work with staff to improve knowledge as current staff are eligible to retire. Develop departmental contingency plans by January 2016	Contingency plan completed for each department. Re-evaluate annually and as needed
b) Continue to explore ways to enhance hiring competition Meet with County HR Director at least annually and prn	# of meetings with HR Strategies developed
c) Increase recruitment efforts for MRC volunteer pool, including but not limited to nursing staffing	# of presentations # of volunteers added
d) Maintain ongoing MOUs with Lakeview College of Nursing, University of Illinois College of Nursing, DACC Nursing program	MOUs on file with nursing programs
e) Utilize unpaid Internships By 2016, annually enlist at least 1 intern at VCHD	# of interns utilized # and type projects completed by intern(s)
f) Partner with other agencies to enhance/ supplement our efforts (ex: U of I Extension provides nutrition education for WIC	List of agencies or partners utilized to enhance VCHD

program)	services
g) Update technology resources	Review and purchase annually needed software upgrades; improved server capacity/capability. Upgrade computers, printers, as needed
a. Continue to work towards moving paper records to online systems,	
i. Environmental Health. By 2020, upload 8300+ sewage files in an electronic database.	# of Sewage files uploaded
ii. Investigate process and resources needed to have food files in an online format by 2025.	
iii. Billing System (for immunization billing and other services) implemented by 2020	Name and date of billing software/system utilized
iv. Electronic Medical Records by 2025 (as funding allows)	Name and date EMR record system implemented
b. Ensure compatibility with State online systems such as ICARE, INEDSS, CEMP, Cornerstone, etc.	Annual review and prn as new online systems are added at VCHD.



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Goal 5: Enhance Emergency Preparedness Response and capabilities

VCHD continually develops and implements all hazards emergency prepared/emergency response plans and develops and coordinates community volunteer resources in the event of a public health emergency such as a pandemic, mass outbreak, environmental emergency event or bioterrorism event. VCHD seeks to enhance our capabilities where possible and assure our readiness to respond to a public health emergency. By 2020, VCHD seeks to add at least 25 volunteers to its volunteer roster.

Intervention Strategies:	Evaluation
a) Continue to partner with Vermilion County Emergency Management, Hospital Emergency Prep folks (ongoing)	List of areas of cooperation: # of shared exercises # of shared documents/ reports # of collaborative meetings/ emails, etc
b) Seek new partnerships with Village Mayors to enhance emergency preparedness efforts. By 2016, identify key contact person in county towns/villages. By 2017, develop strategy(s) to share emergency information to each community in a timely and effective manner.	List of key contacts for each community within VC # of presentations/meetings with village mayors/council to develop best strategies for sharing information in emergency situations. Description of strategies to be utilized
c) Enhance recruitment of volunteers utilizing Nursing school partnerships. By 2016, provide 1-3 presentations annually at schools/colleges of nursing	# presentations # of volunteers added
d) Seek new partnerships with School Districts including Dist 118 and county schools to enhance emergency preparedness efforts	# of presentations or collaborative meetings, emails, etc provided to school districts
a. By fall 2016, explore utilization of established school communication systems with parents	# and list of partnering schools Description of how communications are

<p>and family to “blast” or share information in emergency situations and to promote VCHD in general with at least 1 school district. By 2018, make contact will all county schools.</p>	<p>shared with and throughout each school district</p>
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Strategic Plan 2015-2020**

Appendices

A-1.1SWOT Analysis/Strengths & Weaknesses

A-1.2.....SWOT Analysis/ Opportunities & Threats

APPENDICES – A-1.1

Strengths What do we do well?	Weaknesses What could we improve?
<ul style="list-style-type: none"> A. Efficient/ Knowledgeable Staff / Dedicated Staff B. Long-tenured Key Staff C. Staff are able to multi-task D. Professionalism E. Strong Fiscal Management F. Ongoing quest for quality (staff do ongoing training & education) G. Partner well with community organizations/agencies & other LHD’s (spec. Presence Foundation, CUPHD) H. Work well with 3 schools of nursing in our area (we have MOU’s with all 3 schools) I. Credibility with stakeholders/ including having a “neutrality” that stakeholders find beneficial (Health Dept can be the “Switzerland for the community) J. Good reputation in the community K. Good media and public relations L. Overall community support of programs (we don’t do everything, but people seem to like what we do) M. Integrity N. Accessible Physical Plant (building) O. Building maintenance / improved upkeep/improved relations P. Volunteerism Q. Engaged Board of Health R. Starting to use Social Media to educate and market Health Dept and its services S. Recently were able to start accepting payment by credit card T. Currently have “synergy” with County Board that we have not had for awhile U. We do community assessment well 	<ul style="list-style-type: none"> 1. Availability of Grants and Programs 2. Comm. Assessment process is time consuming/labor intensive; we have limited staff who know how to do this 3. Too dependent on grant funding/grant funding is program specific/ tax levy too low 4. Under-staffed 5. Less off-site program opportunities (tied to understaffing and diminished programs) 6. Lack of programs to address community needs (i.e., smoking, obesity, alcohol related problems) 7. Due to diminished staff size/ lack of redundancy/sometimes programs or services may be temporarily unavailable due to staff off 8. Salaries are too low/ Benefits continue to be reduced making it challenging to hire qualified staff / difficulty attracting medical providers and/or professional staff 9. Decreased time for training due to funding/time and limited staff (If we send staff to necessary training do we shut down services?) 10. Outdated resources/technology (need updated billing systems, electronic health record systems, EH online systems) 11. We do not promote the Health as well as we could (website, Facebook, media)/ Limited staff time to move forward with promotion) 12. Categorical funding inhibits “system thinking” 13. Reluctance to embrace change on part of some staff 14. Do not have a Health Educator to implement programs/provide education for community, etc 15. Diminished ability to respond to emergencies/disasters due to limited nursing staff. We have a limited volunteer pool at this time 16. Do not have a nursing leader (DON position unfilled d/t funding) 17. Difficulty adapting to changing community needs 18. Lacking a community liaison 19. Reliance on paper records solely in some areas

SWOT Analysis Worksheet – Vermilion County Health Department

APPENDICES – A-1.2

<p>Opportunities What opportunities are open to VCHD? What trends could we take advantage of? How can we turn our strengths into opportunities?</p>	<p>Threats What obstacles do we face? <i>Italicized bullet points indicate threats over which VCHD does not have control</i></p>
<p>0-1 Grant opportunities still exist/ especially with community collaborations and partnerships. Trend is for grants to be less “silo” and more collaborative efforts</p> <p>0-2 Opportunity for new grants and programs</p> <p>0-3 Opportunity to meet community needs by adding programs and services for issues such as smoking, obesity, STDs</p> <p>0-4 Opportunity for more collaboration</p> <p>0-5 More open to services/activities & “outside of the box” thinking than in the past. We have had to look at more partnerships to accomplish goals (ex: U of I extension w/WIC; HALO, etc)</p> <p>0-6 Improved community partnerships</p> <p>0-7 Opportunity to increase revenue with billing for Immunizations due to Affordable Care Act changes</p> <p>0-8 Trend is for use of social media to reach populations. Health Dept does have website; & 2 Facebook pages)</p> <p>0-9 Opportunity for Media and Community Relations</p> <p>0-10 Opportunity for communication training for staff (how to deal with media/ promote VCHD)</p> <p>0-11 Opportunity to have a more dynamic website</p> <p>0-12 VCHD can be the “thread” that connects health resources in the community</p> <p>0-13 Better utilization of available floor space in building</p>	<p><i>T-1 Funding/ Reduced revenue stream specifically from grants.</i></p> <p><i>T-2 State of Illinois Fiscal Crisis</i></p> <p>T-3 Wave of staff eligible for retirement in the next 1-5 years. Will reduce our “institutional knowledge” considerably. This is a double hit in that many of the staff wear multiple, multiple hats! We will need to replace an employee who is currently doing 3 people’s jobs</p> <p>T-4 Competition to hire qualified employees due to lower salaries/ continually reduced benefits</p> <p>T-5 We still do not know full impact that Affordable Care Act will have on Health Department business. The need for VCHD to be more “business” like and less public health focused may greatly impact what services we provide and how we provide them. Or may eliminate some services all together</p> <p>T-6 Financial restrictions on headcount</p> <p>T-7 Difficulty in locating qualified candidates for certain jobs</p> <p>T-8 Community expectations of services from VCHD during a public health crisis, despite reduction in the number of nurses employed here</p> <p>T-9 Local Media</p> <p><i>T-10 Unknown Pandemics</i></p> <p><i>T-11 Community Economic Development</i></p> <p><i>T-12 Transient Population (Due to Prison & closing of Section 8 Housing in Chicago Area)</i></p> <p><i>T-13 Affordable Care Act – Access to Care</i></p> <p><i>T-14 Large Geographical County</i></p>