



Strategic Plan Status Report  
July 2020 – December 2020

Revised February 2021

**Protecting and Improving the Health of Iowans**

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# Acknowledgements

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## Symbols Key

GOALS			
	All Targets Met, Score on indicators increasing		Not All Targets Met, Score on indicators increasing
	All Targets Met, Score on indicators equal to last quarter		Not All Targets Met, Score on indicators equal to last quarter
	All Targets Met, Score on indicators decreasing		Not All Targets Met, Score on indicators decreasing


STRATEGIES	
	On Target > half of scheduled actions completed or in progress
	Caution ≤ half of scheduled actions completed or in progress
	Off Target > half of scheduled actions not started or behind schedule
	No Information ≥ half of actions with no information (not scheduled to begin yet)

ACTION / ACTIVITIES	
	Completed
	In Progress
	Not Started / Behind Schedule
	No Information (Not scheduled to begin yet)

INDICATORS / MEASURES				
	Target Met, Trend in Right Direction	Score=6		No Information
	Target Met, No Trend	Score=5		Not Yet Defined
	Target Met, Trend in Wrong Direction	Score=4		
	Target Not Met, Trend in Right Direction	Score=3		
	Target Not Met, No Trend	Score=2		
	Target Not Met, Trend in Wrong Direction	Score=1		

 **Goal 1: Strengthen the department's role as Iowa's chief health strategist (CHS).**  
IDPH Strategic Plan (2017-2021)




**Summary**

During 2020 and 2021, IDPH's role as Chief Health Strategist for acute infectious disease is vital in response to the COVID19 pandemic. As a result, IDPH has shifted from developing staff capacity through the training outlined in the strategic plan to strengthening the implementation of the three tactics that are essential for improving health in any situation:










1. Gathering and analyzing the best data available.
2. Implementing strategies based on scientific evidence from a variety of sources and situations.
3. Engaging as many partners as possible to support tactics 1 and 2 and to ensure the entire population gets access to needed services.


As a result, the strategies below designed to strengthen the department's role as Iowa's chief health strategist across all types of health-related issues have been delayed resulting in the "red" rating.

**Indicators**

-  **Use of CHS tactics within IDPH programs**  
IDPH Strategic Plan (2017-2021)
-  **Percent of employee performance plans with CHS tactics identified (partnerships, performance improvement, health equity)**  
IDPH Strategic Plan (2017-2021)
-  **Percent of IDPH staff trained in CHS tactics**  
IDPH Strategic Plan (2017-2021)

**Status**

Strategies	Actions/Activities	Action/Activity Progress
 <b>Strategy 1.1: Communicate with staff about CHS tactics.</b>	 <b>Develop/adopt definitions for CHS tactics.</b>	An initial set of definitions for what a chief health strategist role means for IDPH was approved by the IDPH executive team in August 2017 and rolled out to staff via an all staff meeting on September 6, 2017. Two trainings were offered to staff in 2018.
	 <b>Train staff in CHS tactics.</b>	The Health Promotion and Chronic Disease Prevention division undertook a division-wide professional development opportunity to train all 90 staff on the refreshed 10 Essential Public Health Services. Facilitated by the department's PHAB Coordinator and Training Coordinator, each 10 EPHS was discussed to help staff identify ways in which they were engaging the strategy or sought to increase their engagement. Outcomes of the effort have led to increased cross-bureau strategy/method sharing, exposure to key public health methodology, and additional training planned in 2021 regarding identified capacity gaps, including data assessment/visualization and communication methods.  Ongoing:  CHS has been added to new employee orientation. CHS definitions and resource contacts have been placed in IDPH conference rooms.  Continuing to offer trainings for quality improvement, performance management and training on the CHS climate and tactical assessment tools.
 <b>Strategy 1.2: Strengthen department capacity in CHS Tactic 1: What do we know? Data.</b>	 <b>TBD</b>	Ongoing. Staff from the bureaus of Public Health Improvement and Policy & Workforce Services have been tasked to develop new strategies for employee engagement in CHS work. The work has been delayed due to COVID-19.
 <b>Strategy 1.3: Strengthen department capacity in CHS Tactic 2: What can we do? Strategies.</b>	 <b>TBD</b>	Ongoing. Staff from the bureaus of Public Health Improvement and Policy & Workforce Services have been tasked to develop new strategies for employee engagement in CHS work. The work has been delayed due to COVID-19.
 <b>Strategy 1.4: Strengthen department capacity in CHS Tactic 3: Who can help? Partnerships.</b>	 <b>Assess the strength/quality of existing partnerships using the IDPH Partnership Assessment Tool.</b>	The Bureau of Public Health Performance conducted a webinar training on the partnership assessment tool as part of a community health assessment training series for local public health administrators in November 2020. The Partnership Assessment Tool was added to the department's <a href="#">Community Health Needs Assessment and Health Improvement Plan (CHNA&amp;HIP) guidance page.</a>

















 **Goal 2: Strengthen the department's capability and capacity to improve population health through communications, workforce development and performance improvement.**  
IDPH Strategic Plan (2017-2021)

**Summary**














The "red" rating for this goal is primarily due to decreases in two activities: performance management (PM) related QI and overall formal QI activities. There are three likely causes for the decreases in these activities: 1) Staff vacancies and turnover in the QI and PM coordinator positions. 2) Less staff participation in QI and PM activities due to COVID response. 3) The shift to teleworking (these types of activities are typically done in person).


Still, 31% of staff (132) participated in formal QI activities in 2020 and many additional staff have been involved recently in defining new Result Based Accountability measures for performance management. The QI Coordinator position still has not been filled. Once filled, it is expected that the previous positive trend of QI activity in the department will resume.

**Indicators**

-  **Communication: Percent of employees that are satisfied with the information they receive about what's going on in other parts of the departmen.**  
IDPH Strategic Plan (2017-2021)
-  **Communication: Percent of employees that know the IDPH vision (Employee Survey)**  
IDPH Strategic Plan (2017-2021)
-  **Communication: Percent of employees that know the IDPH mission (Employee Survey)**  
IDPH Strategic Plan (2017-2021)
-  **Communication: Percent of employees that see a clear link between their work and the department's strategic plan (Employee Survey)**  
IDPH Strategic Plan (2017-2021)
-  **Workforce Development: Percent of employees that agree "IDPH has the right people with the right skills to do its work" (Employee Survey)**  
IDPH Strategic Plan (2017-2021)
-  **Workforce Development: Percent of employees that agree "Department management encourages me to develop my job skills so I can advance m.**  
IDPH Strategic Plan (2017-2021)
-  **Workforce Development: Percent of employees that agree "I am recognized for my work" (Employee Survey)**  
IDPH Strategic Plan (2017-2021)
-  **Workforce Development: Percent of staff participating in internal training**  
IDPH Strategic Plan (2017-2021)
-  **PI: Percent of employees that agree "We have good processes for doing our work" (Employee Survey)**  
IDPH Strategic Plan (2017-2021)
-  **PI: Percent of employees that agree with "I have influence in defining my work processes" (Employee Survey)**  
IDPH Strategic Plan (2017-2021)
-  **PI: Percent of employees that agree to "I have influence in improving my work processes" (Employee Survey)**  
IDPH Strategic Plan (2017-2021)
-  **PI: Percent of employees who report that performance improvement elements are in place**  
IDPH Strategic Plan (2017-2021)
-  **PI: Percent of employees who agree with "I know how the measures I use in my work fit into the department's overall measures of improvement..**  
Public Health Performance
-  **PI: Percent of employees formally participating in quality improvement (QI) activities**  
Public Health Performance
-  **PI: Percent of employees participating in performance management activities**  
Public Health Performance
-  **PI: Number of quality improvement (QI) adventures resulting from performance management**  
Public Health Performance

Status


Strategies	Actions/Activities	Action/Activity Progress
<p> Strategy 2.1: Enhance internal and external communications, including IDPH branding; improve how people communicate and what is communicated.</p>	<p> Communicate with staff and stakeholders about the IDPH strategic plan.</p>	<p>The IDPH Strategic Plan and biannual status reports are published on the <a href="#">IDPH Bureau of Public Health Performance Strategic Planning page</a>. The status reports provide an update on current progress on goals, objectives, strategies and actions.</p>
	<p> Continue to use established communication methods (e.g. weekly emails from Deputy Director, Bus Stop sessions, all staff meetings) and develop and use new communication methods to inform staff about important organizational functions/processes.</p>	<p>An all-staff winter meeting, including staff recognition, was held on December 9, 2020. Each division director produced a short video message recognizing their staff. Director Garcia provided additional staff updates and answered questions from staff.</p> <p>An all staff meeting was held on August 7, 2020 with Director Garcia providing updates and answering questions from staff.</p>
	<p> Provide training to staff on internal and external communication and meeting facilitation.</p>	<p>New Employee orientation includes training on internal and external communications.</p>
<p> Strategy 2.2: Implement workforce development strategies to assure human resource capabilities match needs today and in the future.</p>	<p> Develop at least one cross-sectional team for the selected health issues [Goal 3].</p>	<p>The full Obesity, Nutrition and Physical Activities Strategies Team meets bi-monthly. Workgroups are meeting monthly to finish up strong for the final year of the 2017-2021 strategic plan time frame and to prepare for continuation of the team beyond 2021.</p> <p>Other cross-department teams: The Health Equity Drivers Forum established an official charter for 2021-2023 to clearly identify the ways in which the forum supports the department's health equity infrastructure, including completion of the first annual report for 2020 activities. Policy and Workforce Services engaged multiple internal and external partners in an effort to develop web based tools to improve our support to the healthcare care workforce and rural health initiatives.</p>
	<p> Identify and provide training to staff on informatics and analytical skills.</p>	<p>As we prepare for the 2021 calendar year for professional development, we are looking at holding trainings related to data visualization. In addition to Google trainings in 2020, a training on pivot tables was held on October 28, 2020. The workforce skills assessment will also better inform what specific types of training related to informatics and analytical skills need to be held.</p>
	<p> Review and update the department's Workforce Development Plan.</p>	<p>The <a href="#">Workforce Development Plan</a> is due to be updated for July 1, 2021. The Workforce Skills Assessment will be conducted in March 2021 to better inform the changes to the plan.</p>
<p> Strategy 2.3: Improve organizational practices using performance improvement.</p>	<p> Establish a department-wide QI Council.</p>	<p>The Quality Improvement Council has 12 members, three of which are permanent (QI Coordinator, PM Coordinator, and Deputy Director). Council members serve 2-year terms. New members are selected via an annual online submission form provided to all staff. Newly selected council members attend 6 orientation classes covering the basics of QI methodology, facilitation training, and strategies using a variety of process improvement tools. The council's main areas of focus are in providing capacity building training to the department, and working with teams on identifying and responding to opportunities for improvement through facilitated Adventures. Four new members began their terms January 2021. In 2020: 132 individuals or 31% of IDPH staff formally participated in QI activities (QI adventures + QI trainings + QI council). Visit the <a href="#">IDPH Quality Improvement page</a> for the department's performance improvement plan and performance improvement resources.</p>
	<p> Provide QI training to staff.</p>	<p>In 2020, 19 QI training sessions were offered with a total of 81 unique individuals attending. 15 training sessions offered in 2019 with 70 unique individuals. Performance improvement is also covered at each new employee orientation session.</p>
	<p> Review and update the QI Plan.</p>	<p>A Performance Improvement culture assessment was conducted in October 2020. A final report will be issued January 2021. The new PI plan is scheduled for review and approval by Executive Team March 2021. The current <a href="#">Performance Improvement Plan</a> was approved by the IDPH executive team in December 2019. This plan combines the QI plan and the performance management structure documents.</p>
	<p> Complete at least one formal QI Adventure (project) annually.</p>	<p>In 2020, 7 QI adventures were conducted with 49 unique individuals participating. 15 QI adventures were conducted in 2019 with 92 unique individuals.</p>


 **Goal 3: Implement a collaborative approach to addressing Iowa's top health issues throughout the department.**  
IDPH Strategic Plan (2017-2021)

**Summary**








The IDPH Wellness Committee has been a particularly successful outcome of the collaborative team developed to work on Goal 3. Wellness Committee activities have covered physical, mental and financial health and wellness topics. Nearly 50% of staff have attended at least one Wellness Wednesday discussion. The Obesity, Nutrition and Physical Activity Strategies Team (Goal 3 Team), continues to meet virtually and discuss strategies to improve collaboration across the department.

**Indicators**

 **Outcomes/metrics of progress toward improvement of the selected health issues**  
IDPH Strategic Plan (2017-2021)

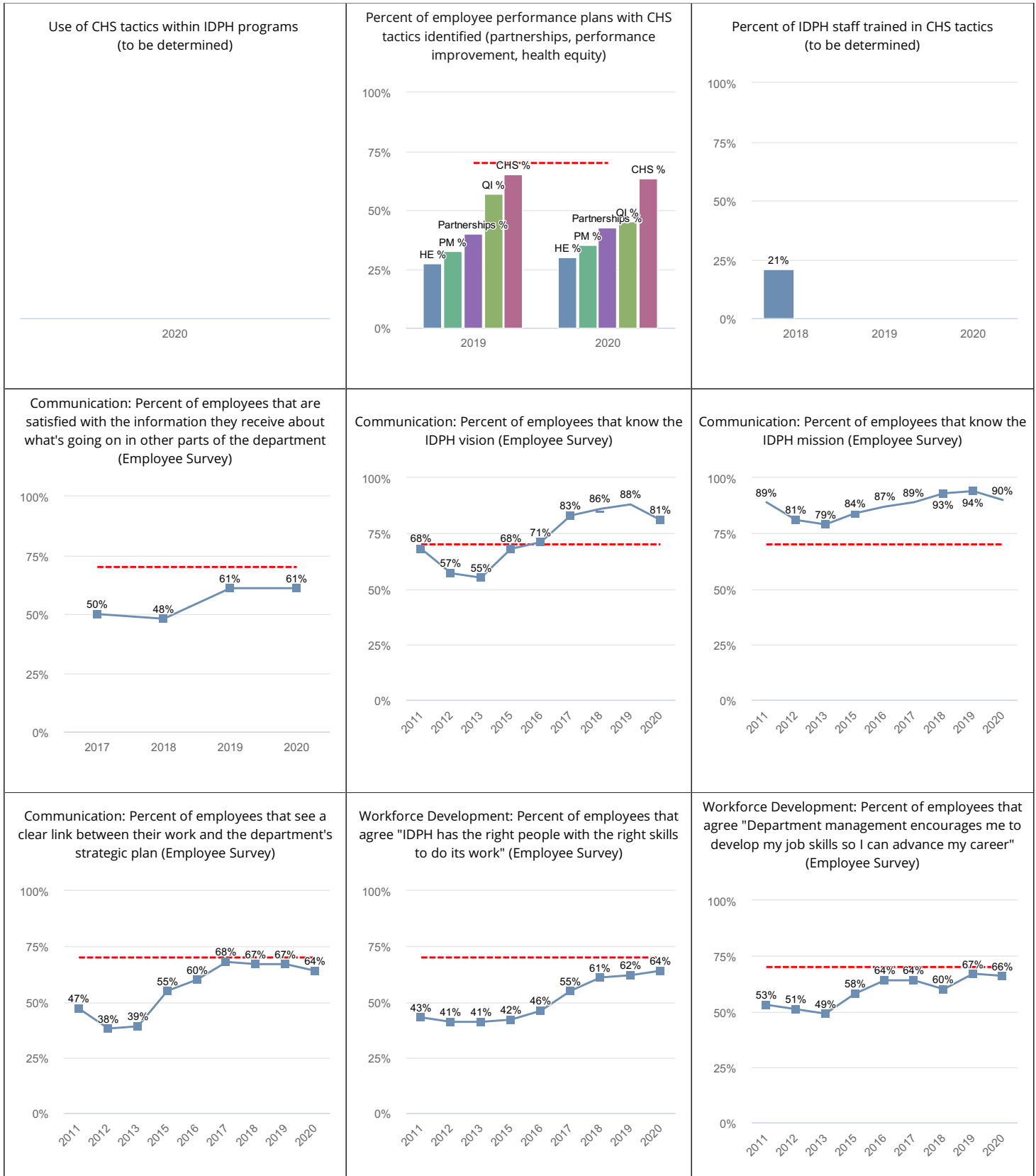
 **Number of IDPH programs that have activities or data to address Obesity, Nutrition & Physical Activity**  
IDPH Strategic Plan (2017-2021)

**Status**

Strategies	Actions/Activities	Action/Activity Progress
<p> <b>Strategy 3.1: Develop and implement collaborative activities throughout the department related to addressing obesity in Iowa.</b></p>	<p> <b>Document how IDPH programs impact obesity and how programs may be impacted by obesity.</b></p>	<p>The cross-sectional Obesity, Nutrition and Physical Activity Strategies Team is working on its 2020-2021 work plan which includes a continuation of the work to document how programs impact or may be impacted by obesity.</p>
	<p> <b>Communicate to and educate staff/partners on obesity-related issues and on strategies to address the issues.</b></p>	<p>The Obesity, Nutrition, and Physical Activity Strategies Team is revising a set of Healthy Eating and Active Living (HEAL) strategies outlining policy, systems and environmental practices that early care and education, schools, communities, and work sites can implement to improve nutrition and physical activity.</p>
	<p> <b>Identify and implement program strategies to address obesity.</b></p>	<p>The IDPH Wellness Committee hosted 28 virtual weekly "Wellness Wednesday Discussions" between the dates of April 15, 2020 and December 30, 2020. A total of 1,463 participants (not including those who called in via phone) participated in the 28 events. Each event had between 21 and 126 staff participating. A total number of 203 staff (including 11 leadership staff) attended at least one Wellness Wednesday Discussion event. Topics included areas of health such as physical wellbeing, mental wellbeing and financial wellbeing. The IDPH Wellness Committee also began hosting wellness challenges beginning in September 2020. Topics for these challenges included water intake, physical activity, stress cleanse and sleep hygiene. Plans for 2021 includes a challenge around nutrition and kindness with continued Wellness Wednesday Discussions.</p>
	<p> <b>Assess financial sustainability and identify potential sources of funding for obesity-related strategies.</b></p>	<p>Multiple bureaus/divisions were represented during the Obesity, Nutrition and Physical Activity Strategies Team June meeting where a workplan was developed to address this action step.</p>
	<p> <b>Assess, identify, analyze, and distribute data related to obesity.</b></p>	<p>Multiple bureaus/divisions were represented during the Obesity, Nutrition and Physical Activity Strategies Team June meeting where a workplan was developed to address this action step.</p>
	<p> <b>Identify the social determinants of health (SDH) that impact obesity.</b></p>	<p>The Goal 3 Core Team is collaborating with the Health Equity Drivers Forum to incorporate SDH into health equity assessments. The Goal 3 Team also hosted meetings in August and September to address the topic of SDH. Presentations were provided by department staff in August addressing how they use I+PSE (Individual + Policy, System, and Environment) strategies to address SDH. In September, Dr. Edward Ehlinger provided a presentation on health equity and SDH.</p>

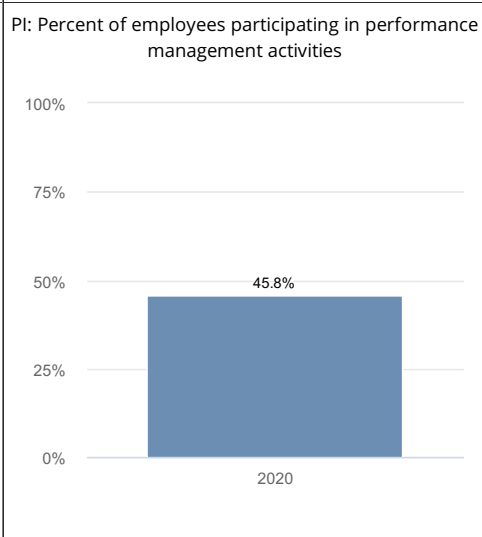
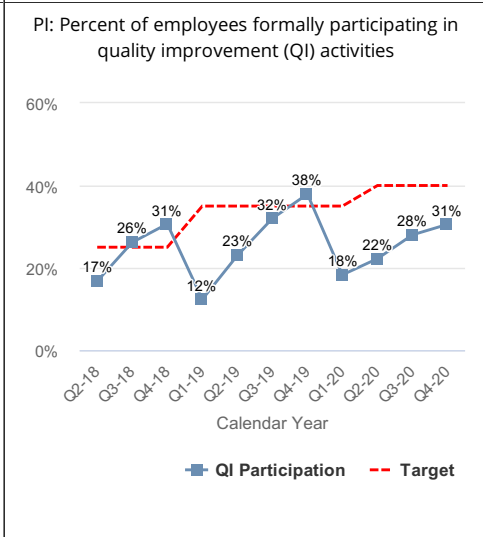
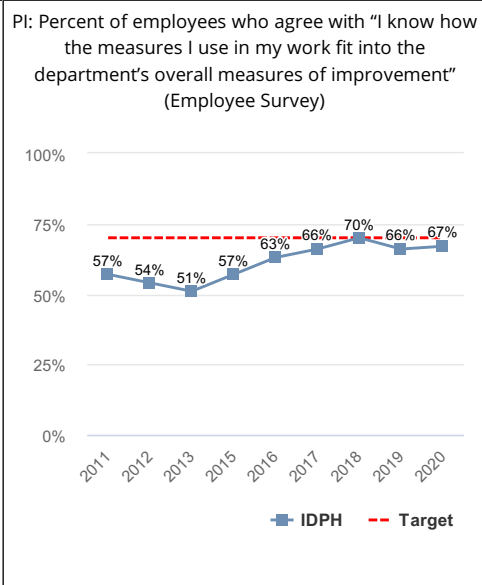
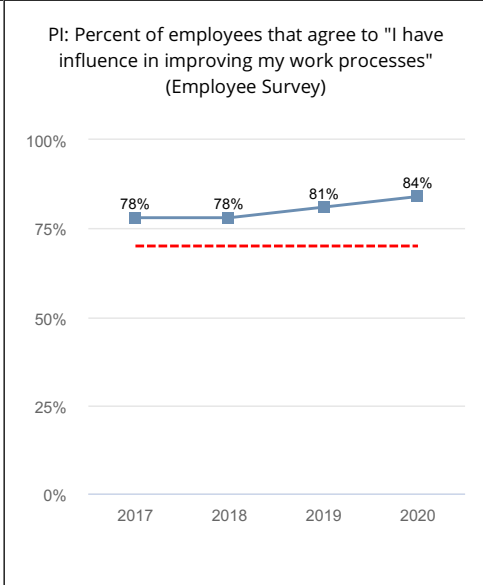
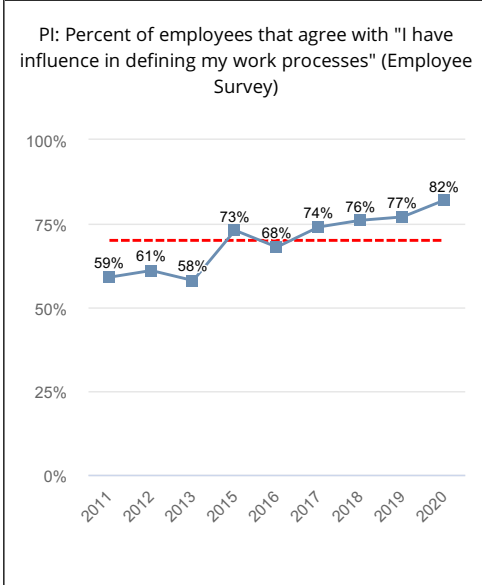
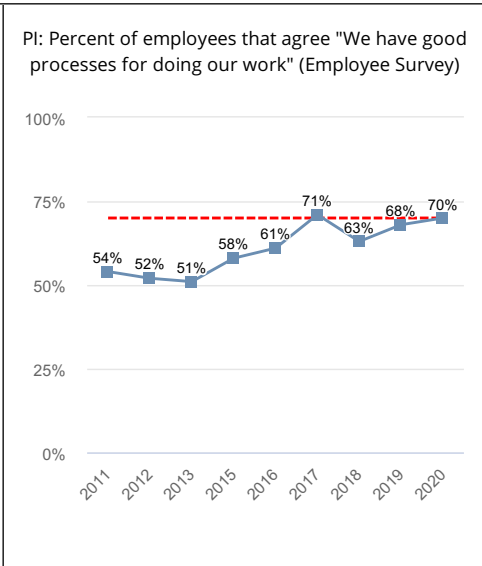
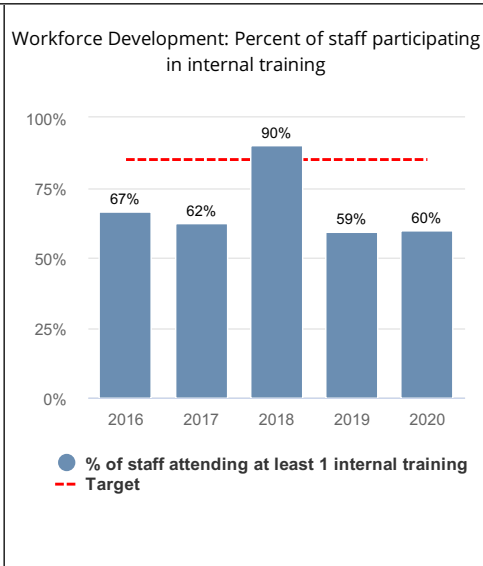
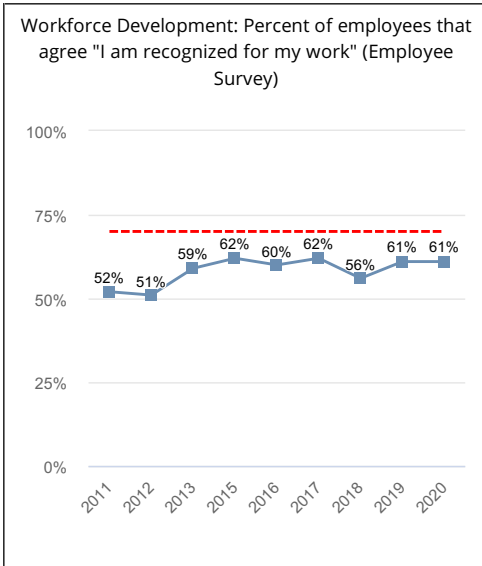
# Strategic Plan Dashboard

IDPH Strategic Plan (2017-2021)



# Strategic Plan Dashboard

IDPH Strategic Plan (2017-2021)





# Strategic Plan Dashboard

IDPH Strategic Plan (2017-2021)

