Strategic Planning in Public Health

Developing a Strategic Plan for Public Health Accreditation

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Presentation Overview

This presentation will include;

❑ Overview of Cherokee Nation.

❑ Overview of Cherokee Nation Public Health.

❑ What is a Strategic Plan?

  o **How does a Strategic Plan fit into the grand scheme of PH accreditation?**

❑ The process used by CNPH to develop a Tribal Public Health Strategic Plan.

  o **CN Public Health Committee's role in developing the Strategic Plan**

  o **Use of the National Public Health Performance Standard (NPHPSP) as a self-assessment tool**

  o **Use of data/information from CN's Tribal Health Assessment (THA)**

  o **CN's Tribal Health Improvement Plan (THIP) and its relationship to the Strategic Plan**

  o **Integrating HD's current work plans into the Strategic Plan**

  o **Finalizing, publishing and communicating the Strategic Plan**

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Overview of Cherokee Nation
(Tribal Jurisdiction Area)

➢ Comprised of 14 counties in NE Oklahoma

- 6 counties fall wholly w/in CN jurisdiction

- 8 counties fall partially w/in CN jurisdiction

➢ Tribal Jurisdictional Service Area (TJSA)

- 9,200 square miles

- 51% of TJSA is rural vs. 32% for State

- Capital is in Tahlequah

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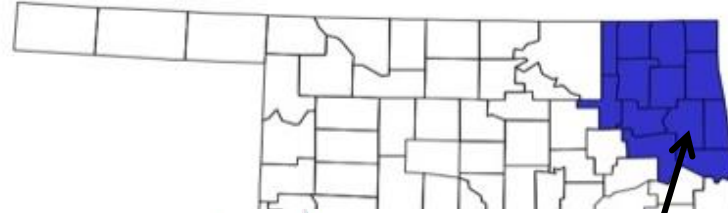
Overview of Cherokee Nation
(Demographics)

➢ CN is the second largest Tribe in the US

Population of CN – Registered CN Tribal Members	
National Population**	315,647
Oklahoma Population**	210,155
CN 14 County **	166,480
CN 14 County TJSA**	139,431

Population of CN 14 Counties		Population of CN 14 Counties TJSA	
Total Population (all Races)*	1,157,831	Total Population (all Races)*	505,021
Total Population (all AI/AN)*	345,515	Total Population (all AI/AN)*	189,440
Total Population (Cherokee citizens)**	166,480	Total Population (Cherokee citizens)**	139,431

*Census 2010 (SF 100% data)
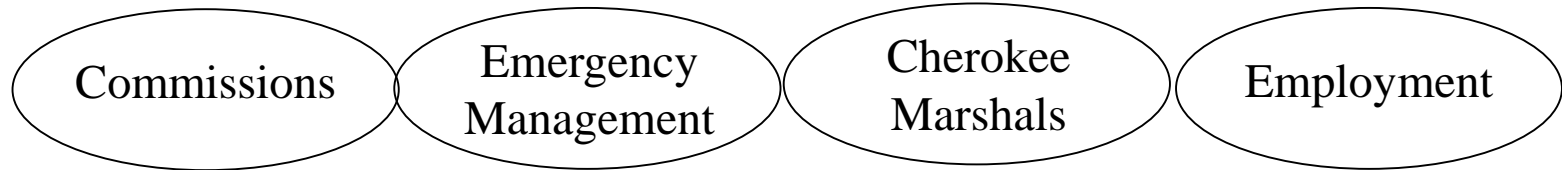**CN Registration Dept. (1/28/2013)

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Make-Up of the Cherokee Nation

- Executive Branch
- Legislative Branch
- Judicial Branch

Commissions

Emergency Management

Cherokee Marshals

Employment

11 Services groups

Departments/Facilities/Clinics

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Organizational View of CN:
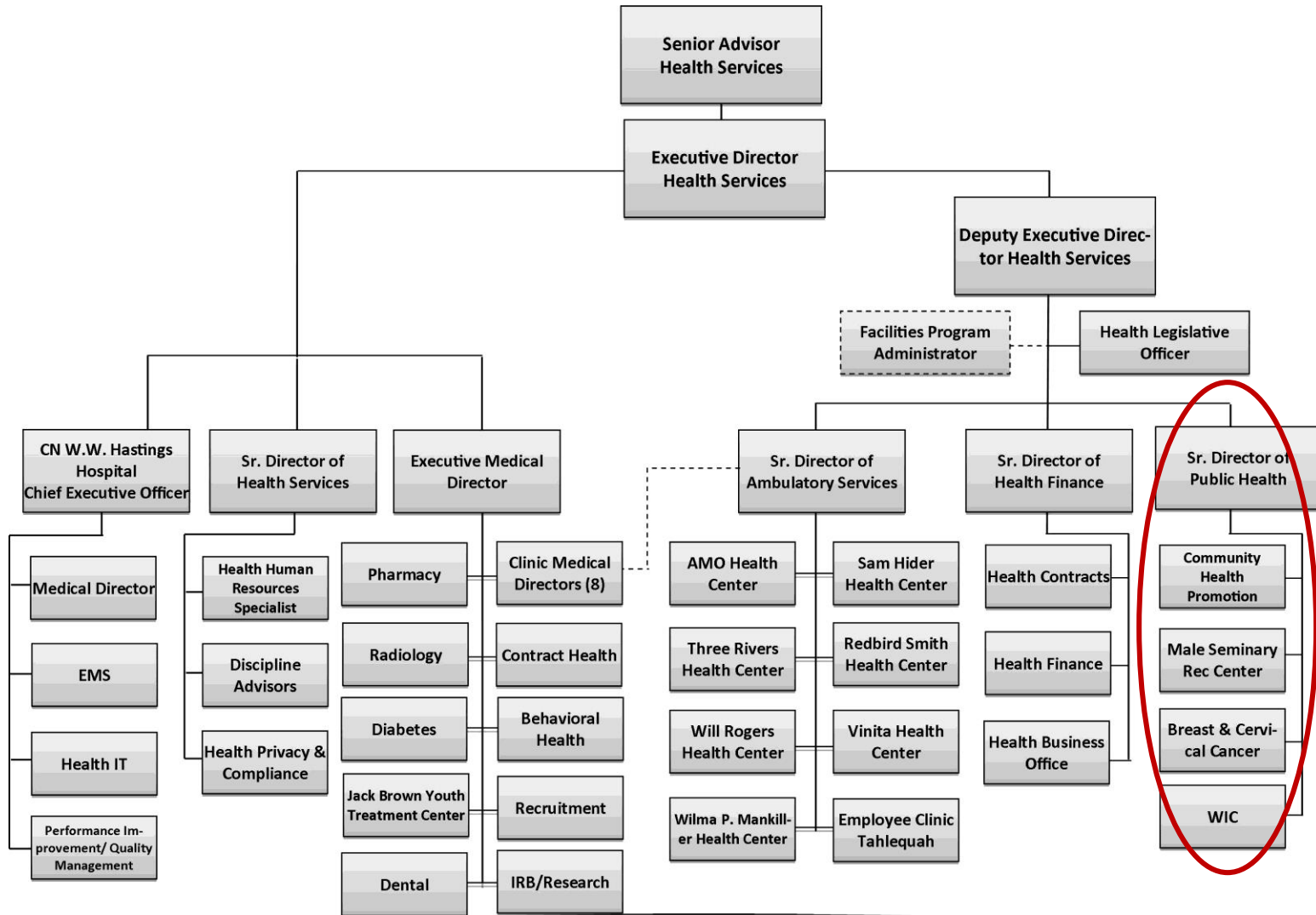## Made up of 11 "Services" groups

- Housing Authority
- Tribal Citizenship
- Natural Resources
- Human Services
- Commerce
- Career Services

- Community Services
- Real Estate Services
- Education Services
- Health Services
- Tag Office

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Functional View of CN Health Services

Organizational chart:

- **Senior Advisor Health Services**
  - **Executive Director Health Services**
    - **Deputy Executive Director Health Services**
      - Facilities Program Administrator
      - Health Legislative Officer

- **CN W.W. Hastings Hospital Chief Executive Officer**
  - Medical Director
  - EMS
  - Health IT
  - Performance Improvement/ Quality Management

- **Sr. Director of Health Services**
  - Health Human Resources Specialist
  - Discipline Advisors
  - Health Privacy & Compliance

- **Executive Medical Director**
  - Pharmacy
  - Radiology
  - Diabetes
  - Jack Brown Youth Treatment Center
  - Dental
  - Clinic Medical Directors (8)
  - Contract Health
  - Behavioral Health
  - Recruitment
  - IRB/Research

- **Sr. Director of Ambulatory Services**
  - AMO Health Center
  - Sam Hider Health Center
  - Three Rivers Health Center
  - Redbird Smith Health Center
  - Will Rogers Health Center
  - Vinita Health Center
  - Wilma P. Mankiller Health Center
  - Employee Clinic Tahlequah

- **Sr. Director of Health Finance**
  - Health Contracts
  - Health Finance
  - Health Business Office

- **Sr. Director of Public Health**
  - Community Health Promotion
  - Male Seminary Rec Center
  - Breast & Cervical Cancer
  - WIC

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CN Health Services

CN Public Health

- Community Health Promotions program (Healthy Nation)
- Behavioral Health Prevention program
- Public health Nursing
- CN Cancer program
- Diabetes Prevention Program
- Cherokee Elder Care
- WIC
- Jack Brown Center
- CN EMS
- Environmental Health
- Health Research department
- Emergency & risk Management
- QI/QM (Clinical) Management
- CN Fire Dancers

CN Clinical Health

- A-MO Salina Health Center
- Will Rogers Health Center
- Sam Hider Health Center
- Bartlesville Health Center
- Three Rivers Health Center
- Redbird Smith Health Center
- Vinita Health Center
- Wilma P. Mankiller Health Center
- W.W. Hastings Indian Hospital
- Ga-Du-Gi employee clinic
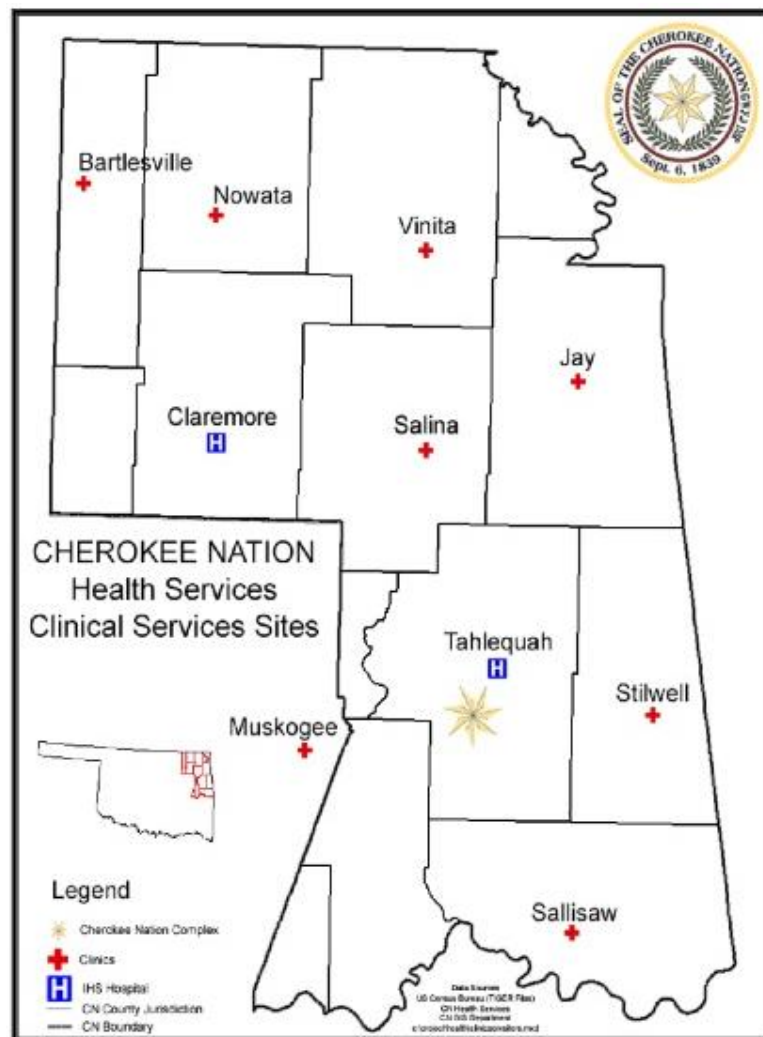- Claremore Indian Hospital (PHS)

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Clinical Health Care

➢ 100,000+ patients

➢ 8 Tribal Health Clinics

➢ 1 Employee Clinic

➢ 1 Tribal Hospital

➢ 1 IHS Hospital

CHEROKEE NATION Health Services Clinical Services Sites

Legend
- ☀ Cherokee Nation Complex
- ✚ Clinics
- H IHS Hospital
- CN County Jurisdiction
- CN Boundary

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CN Health Facilities

A-Mo Salina Community Center

Sam Hider Jay Community Center

Nowata Primary Health Care Center

Muskogee Health Center

Wilma P. Mankiller Health Center

Redbird Smith Health Center

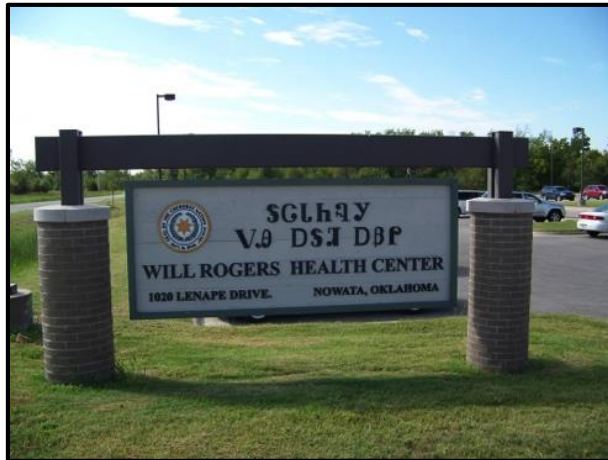Cherokee Nation Public Health
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CN Health Facilities

Vinita Health Center
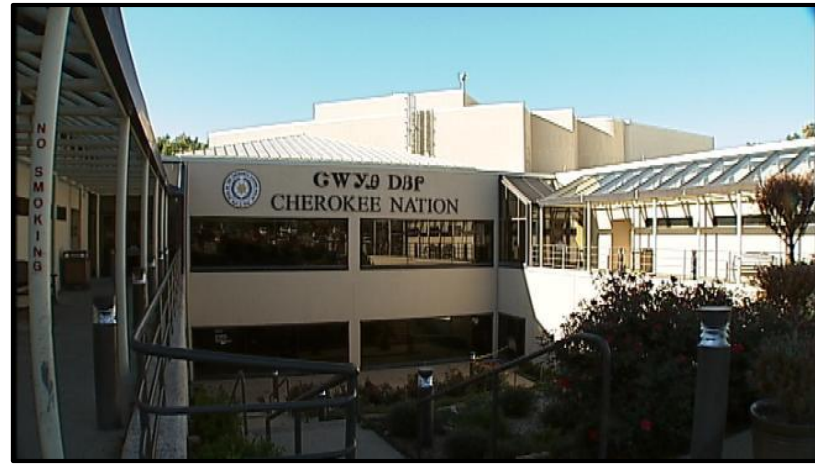
W. W. Hastings Indian Hospital

Bartlesville Health Center

Claremore Indian Hospital (IHS/HHS)

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Overview of CN Public Health

Cherokee Nation Public Health
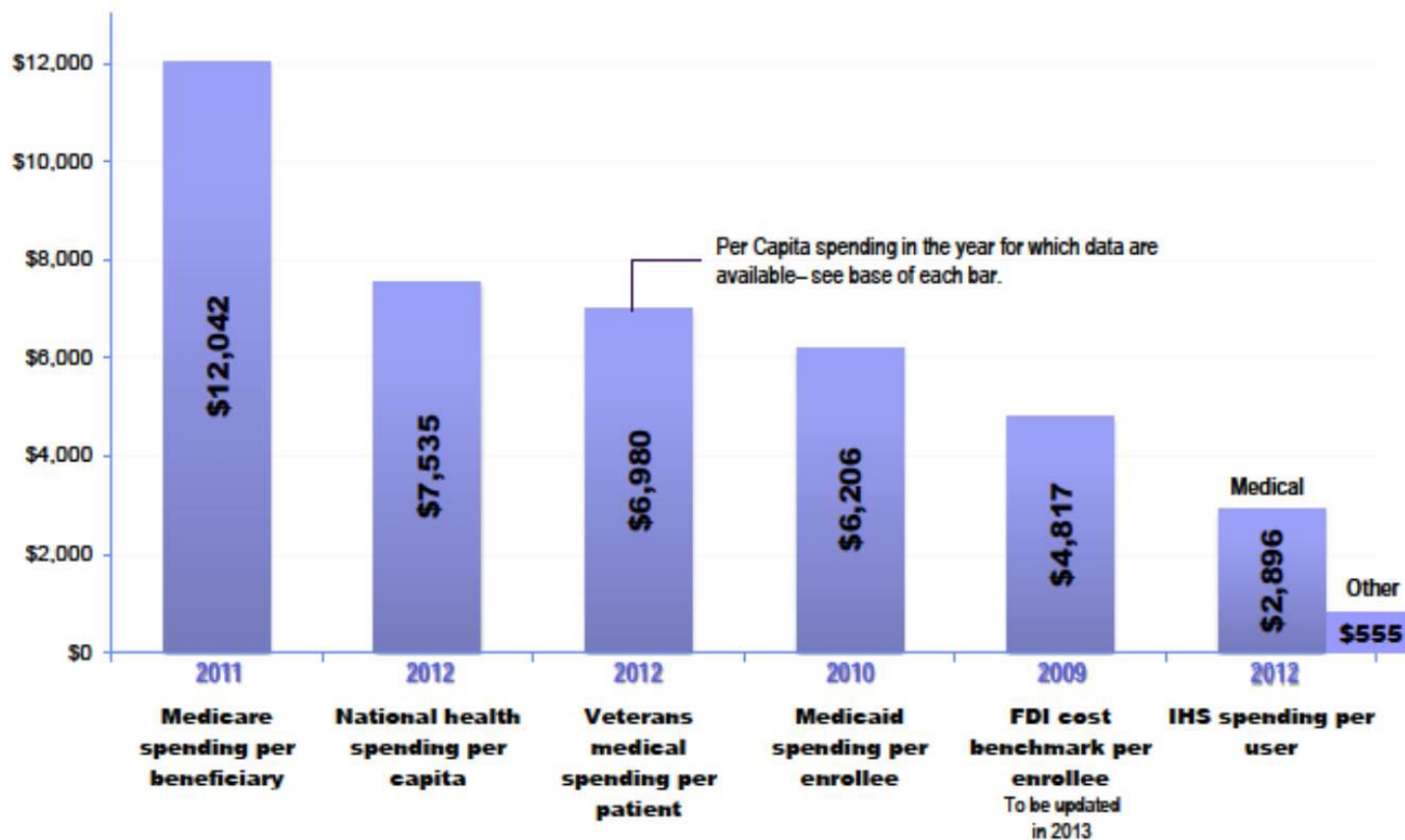
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Why is Public Health Important to Indian Country?

- A healthy Native community gets sick less frequently and spends less money on health care; this means better economic productivity and an improved quality of life for all of Indian Country. However, the reality is that Tribal communities lag far behind other communities in basic public health resources and services.

- Social determinants of health - such as historical trauma, poverty, and inadequate access to prevention and treatment resources - contribute to higher rates of health risk factors and the displacement of traditional and community-based protective factors. This translates into higher incidence rates of diabetes, suicide, mental illness, alcohol and substance abuse, cancer and unintentional injuries.

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2012 IHS Expenditures Per Capita and Other Federal Health Care Expenditures Per Capita

Per Capita spending in the year for which data are available– see base of each bar.

| Category	Year	Amount
Medicare spending per beneficiary	2011	$12,042
National health spending per capita	2012	$7,535
Veterans medical spending per patient	2012	$6,980
Medicaid spending per enrollee	2010	$6,206
FDI cost benchmark per enrollee (To be updated in 2013)	2009	$4,817
IHS spending per user – Medical	2012	$2,896
IHS spending per user – Other	2012	$555

See page 2 notes on reverse for data sources and extrapolation assumptions.
1/8/2013

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Defining CN's Tribal PH System
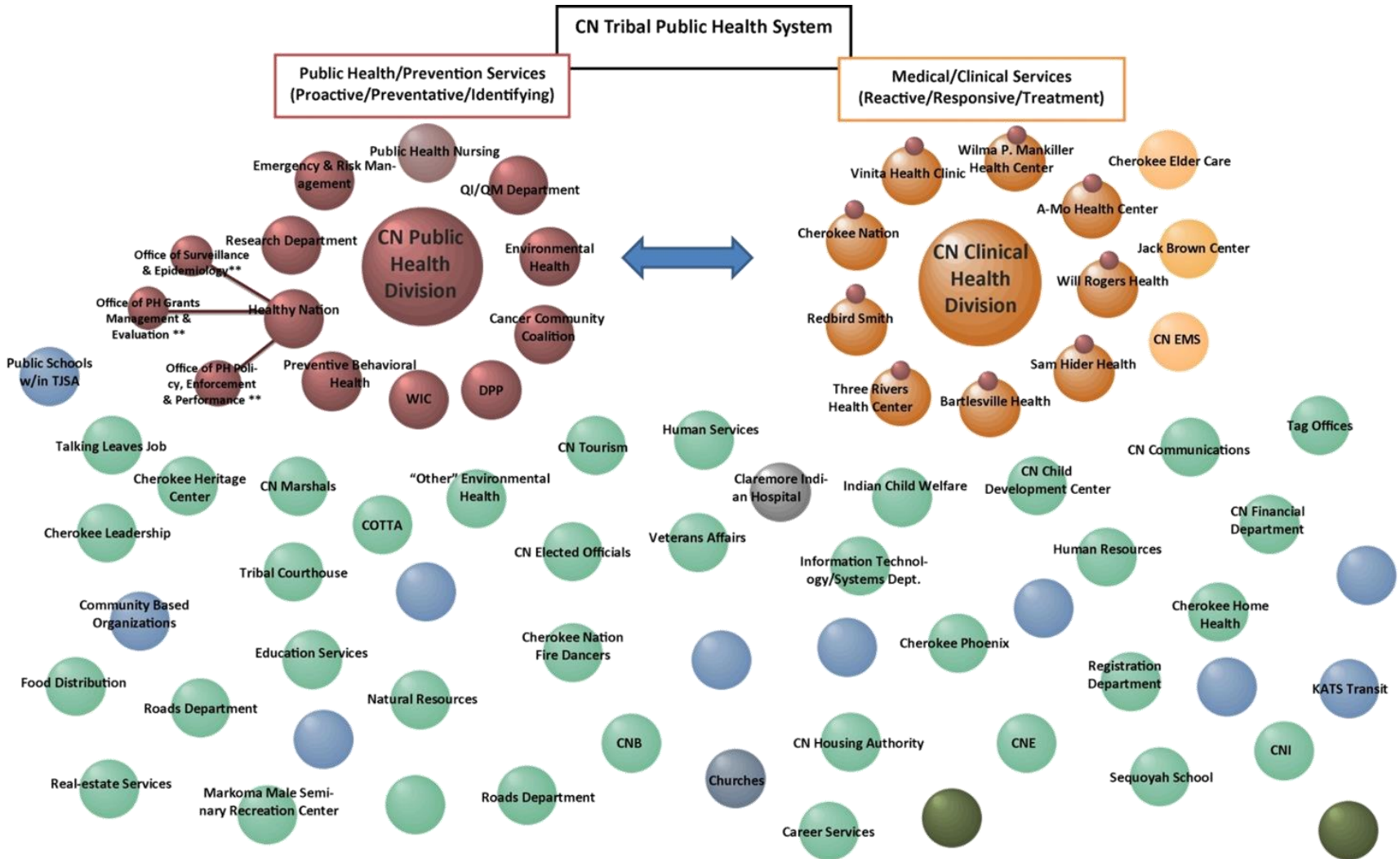
Community Health Promotions Program

- Staff employed: A total of _____
- Funding our efforts:
  - NPHII
  - CTG
  - Traditional Foods Grant
  - Tribal funds
- Current PH infrastructure building efforts:
  - Public Health Accreditation
  - Surveillance & Epidemiology
  - Public Health Performance Management & Quality Improvement
  - PH Workforce Development
- Current PH programs/projects:
  - Cancer Alliance
  - School Health Leadership
  - Obesity task force
  - WINGS
  - Recreational Activity Center

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What is a Strategic Plan?

Strategic Planning 101

- Purpose of a Strategic Plan

- Components of a Strategic Plan

- Who should be involved in developing a Strategic Plan

- Process for completing a Strategic Plan

- Communicating/Implementing your Strategic Plan

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Purpose of a Strategic Plan

- The department's strategic Plan is internal to the health department.

- It sets what the health department plans to achieve and how it will accomplish that

- It is a guide for:
  - Making decisions
  - Allocating resources
  - Taking action

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Components of a Strategic Plan

- Clearly defined timeframe – typically 5 years
- Vision Statement
  - Vision for who HD serves
  - Vision for HD's public health system
- Mission Statement
- Guiding Principals
- Summary of how the planning and development of the Strategic Plan occurred
  - Explain how strategic priorities were identified
  - Explain how relevant data and information were used to ensure decision making & strategic priority setting are data-based.
  - Explain the use of tool used to analyze feedback from stakeholders of data/information on strategic priorities; SWOT analysis is a frequently used tool
  - Identify the themes, issues and assets that were identified during analysis of the feedback from stakeholders; basis for strategic priority setting.
- Strategic Priorities
- Strategic Goals (SMART)
- Listing of Stakeholders that participated in the process.

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Who should be involved in developing a Strategic Plan

- Internal and external stakeholders
- Will provide an example of how CN completed this task

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Process for completing a Strategic Plan

- There are many different frameworks and methodologies for strategic planning and management.
- There are no absolute rules regarding the right framework, most follow a similar pattern and have common attributes.
- Many frameworks cycle through some variation on some very basic phases:
  - 1) **analysis or assessment**, where an understanding of the current internal and external environments is developed
  - 2) **strategy formulation**, where high level strategy is developed and a basic organization level strategic plan is documented
  - 3) **strategy execution**, where the high level plan is translated into more operational planning and action items (**Implementation Guide**)
  - 4) **evaluation or sustainment / management phase**, where ongoing refinement and evaluation of performance, culture, communications, data reporting, and other strategic management efforts occur

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Communicating/Implementing your Strategic Plan

- Internal communication and dissemination

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Process used by CNPH to develop a Tribal Public Health Strategic Plan?

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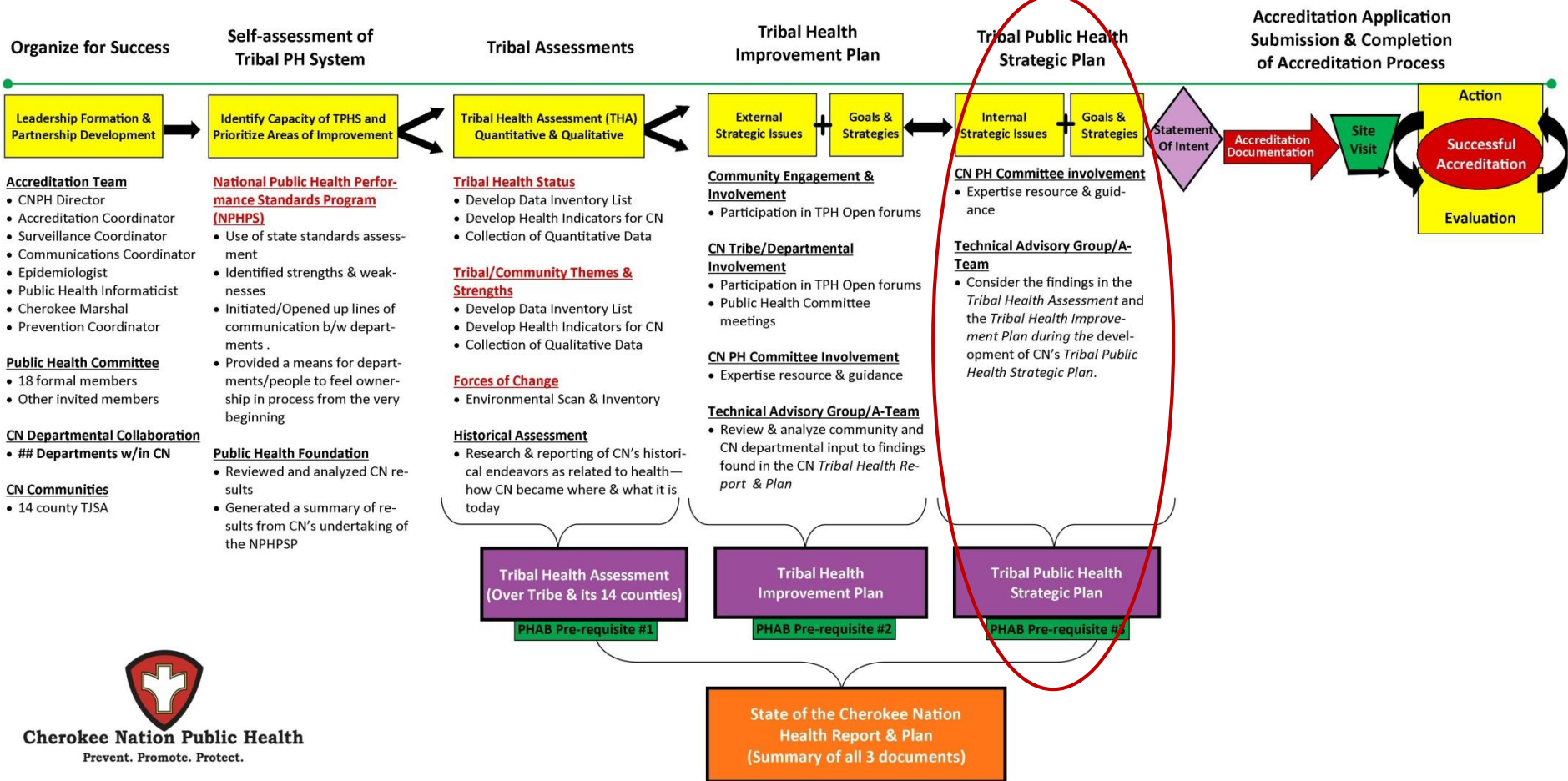Prevent. Promote. Protect.

Steps Taken by CNPH

1. CNPH Committee: Established in February 2011
2. Use of the NPHPSP as a self-assessment tool
3. Use of Data/Information from CN's THA
4. CN's THIP and Its Relationship to the Strategic Plan
5. Integrating CNPH's current work plans into the Strategic Plan
6. Finalizing, publishing and communicating the Strategic Plan within CN

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Cherokee Nation's Approach to Achieving Public Health Accreditation

Organize for Success

Leadership Formation & Partnership Development

Accreditation Team
- CNPH Director
- Accreditation Coordinator
- Surveillance Coordinator
- Communications Coordinator
- Epidemiologist
- Public Health Informaticist
- Cherokee Marshal
- Prevention Coordinator

Public Health Committee
- 18 formal members
- Other invited members

CN Departmental Collaboration
- ## Departments w/in CN

CN Communities
- 14 county TJSA

Self-assessment of Tribal PH System

Identify Capacity of TPHS and Prioritize Areas of Improvement

National Public Health Performance Standards Program (NPHPS)
- Use of state standards assessment
- Identified strengths & weaknesses
- Initiated/Opened up lines of communication b/w departments .
- Provided a means for departments/people to feel ownership in process from the very beginning

Public Health Foundation
- Reviewed and analyzed CN results
- Generated a summary of results from CN's undertaking of the NPHPSP

Tribal Assessments

Tribal Health Assessment (THA) Quantitative & Qualitative

Tribal Health Status
- Develop Data Inventory List
- Develop Health Indicators for CN
- Collection of Quantitative Data

Tribal/Community Themes & Strengths
- Develop Data Inventory List
- Develop Health Indicators for CN
- Collection of Qualitative Data

Forces of Change
- Environmental Scan & Inventory

Historical Assessment
- Research & reporting of CN's historical endeavors as related to health—how CN became where & what it is today

Tribal Health Improvement Plan

External Strategic Issues + **Goals & Strategies**

Community Engagement & Involvement
- Participation in TPH Open forums

CN Tribe/Departmental Involvement
- Participation in TPH Open forums
- Public Health Committee meetings

CN PH Committee Involvement
- Expertise resource & guidance

Technical Advisory Group/A-Team
- Review & analyze community and CN departmental input to findings found in the CN *Tribal Health Report & Plan*

Tribal Public Health Strategic Plan

Internal Strategic Issues + **Goals & Strategies**

CN PH Committee involvement
- Expertise resource & guidance

Technical Advisory Group/A-Team
- Consider the findings in the *Tribal Health Assessment* and the *Tribal Health Improvement Plan* during the development of CN's *Tribal Public Health Strategic Plan*.

Statement Of Intent

Accreditation Application Submission & Completion of Accreditation Process

Accreditation Documentation

Site Visit

Successful Accreditation

Action

Evaluation

Tribal Health Assessment (Over Tribe & its 14 counties)

PHAB Pre-requisite #1

Tribal Health Improvement Plan

PHAB Pre-requisite #2

Tribal Public Health Strategic Plan

PHAB Pre-requisite #3

State of the Cherokee Nation Health Report & Plan (Summary of all 3 documents)

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Developed:10/08/2012   Reviewed/Revised: 11/08/2014

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Engaging CN Stakeholders

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TRIBAL PUBLIC HEALTH SYSTEM
STRATEGIC PLAN 2014-2018

Appendix: Tribal Public Health System Stakeholders

Cherokee Nation's Tribal public health system includes multiple stakeholders, both internal and external to the nation. To better understand the system, we have listed system stakeholders by the 10 Essential Services of Public Health. This will be useful in understanding, defining and mapping our system.

TRIBAL PUBLIC HEALTH SYSTEM STAKEHOLDERS BY ESSENTIAL SERVICE

ESSENTIAL SERVICE 1: Monitor health status to identify and solve community health problems.
- Identification of health risks and determination of health service needs.
- Attention to the vital statistics and health status
- Identification of community assets and resources that support the tribal public health system (TPHS).

• Behavioral Health	• DC Planners
• Cancer Registry	• DPP
• Case Managers	• Education
• Centers for Disease Control and Prevention	• Emergency Management
• Infection Control	• Environmental health
• Clinical Services - IHS/Tribal Centers	• Epidemiology Program
• Primary Acute Care Providers, Public Health Nurses	• GIS
	• Health management
• CN Tribal Council; Health Committee	• Healthy Nation
• CN-HHN	• Marshall Services
• CNMS	• Quality Improvement (QI) - Health IT; Quality Management
• COTTA	
• Environmental Health	• State and County Health Departments
	• WTC

ESSENTIAL SERVICE 2: Diagnose and investigate health problems and health hazards in the community.
- Epidemiological investigations of disease outbreaks and patterns of infectious and chronic diseases, injuries, environmental hazards, and other health threats.
- Active infectious disease epidemiology programs.
- Access to a public health laboratory capable of conducting rapid screening and high volume testing.

• Behavioral Health Prevention	• Epidemiology
• Cancer Registry	• Healthy Nation
• CDC	• Infectious Disease physician (Dr. Mera)
• Clinical Services and WWC	• Infection Prevention
• CNMS	• Laboratory services
• Emergency/Risk Management	• Public Health Nursing
• Environmental health	• Safety committees
• Environmental Protection Agency	• State and County Health Departments

CHEROKEE NATION
TRIBAL PUBLIC HEALTH SYSTEM
STRATEGIC PLAN 2014-2018

TRIBAL PUBLIC HEALTH SYSTEM STAKEHOLDERS BY ESSENTIAL SERVICE

ESSENTIAL SERVICE 3: Inform, educate, and empower people about health issues.
- Health information, health education, and health promotion activities designed to reduce health risk and promote better health.
- Health communication plans and activities such as media advocacy and social marketing.
- Accessible health information and educational resources.
- Health education and health promotion program partnerships

• Behavioral Health	• Environmental Protection
• BIGI	• Healthy Nation
• Cancer	• HPAP
• CDC	• I.T.
• Clinical Services, Health Centers +WWH	• Public Health Nurses
• CNMS	• Schools
• Communications Department	• State and County Health Departments
• Dental	• Tribal Admin
• DPP	• WHC

ESSENTIAL SERVICE 4: Mobilize community partnerships and action to identify and solve health problems.
- Identifying potential stakeholders who contribute to or benefit from public health, and increase their awareness.
- Building coalitions to draw potential resources to improve community health.
- Convening and facilitating partnerships among groups and associations

• Behavioral Health	• Health Promotion Disease Prevention (HPDP)
• CBHS leadership	
• CC Health Services Council	• Marshall
• COTTA	• Media
• EMA	• Public Health Nurse
• Health Careers-WWH	• Red Star Innovations
• Healthy Nation, Cancer	• Schools
• HHH Admin	• State/Health Department

ESSENTIAL SERVICE 5: Develop policies and plans that support individual and community health efforts.
- An effective governmental presence at the community level.
- Development of policy to protect the health of the public and to guide the practice of public health.
- Systematic community-level and state-level planning for health improvement.

• AGI	• Public Health - Healthy Nation
• Behavioral Health	• Local and State Agencies and Government
• CDC	• Marshall Services
• Cherokee County Health Services Council	• Traditional/Cultural People
• Emergency managers	• Tribal Council; Legislative Branch
• Health Leadership	

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Engaging CN Stakeholders

TRIBAL PUBLIC HEALTH SYSTEM STAKEHOLDERS BY ESSENTIAL SERVICE

ESSENTIAL SERVICE 6: Enforce laws and regulations that protect health and ensure safety.
- The review, evaluation, and revision of public health laws and regulations
- Education of persons and entities obligated to obey or to enforce public health laws and regulations.
- Enforcement activities, such as the protection of drinking water; laws governing the sale of tobacco; seat belt and child safety seat usage; and childhood immunizations.

• ABEC	• Public Health Code
• Attorney General's Office	• Public Health NBG (Immunizations)
• Behavioral Health	• Public Health Nurses
• CN Marshall Service	• Quality Management
• Environmental Health and Services	• Tax Commission
• Local and State Law Enforcement	• Tribal Administration
• Med Director Health Centers + WWH	

ESSENTIAL SERVICE 7: Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
- Identifying populations with barriers to personal health services.
- Identifying health service needs of populations with limited access to a coordinated system of clinical care.
- Coordination of provider services and development of interventions that address barriers to care.

• Case Managers	• Healthy Nation
• Cherokee Elder Care; P.A.C.E	• Health Resources and Services
• Health Services leadership; Clinical Services	Administration (agency with US DHHS)
• CN Hospice	Human Resources
• Communications	• I.T.
• Contract Health/MRP	• Law Socio Economics
• COTTA	• Local KATS
• Credentials Committee	• Public Health Nursing
• Emigrant Group/ Infection Prevention	• ROADS
• Employee Health Voices	• Transportation
• EMS	• Tribal Council
• GIS	

ESSENTIAL SERVICE 8: Assure competent public and personal health care workforce.
- Assessment of workforce to meet community needs for public and personal health services.
- Maintaining public health workforce standards, including efficient processes for licensure/credentialing of professional and competencies.
- Adoption of continuous quality improvement and training.

• Career Services	• Information Technology
• CN Health Services Leadership	• Medical Executive Committee
• Education	• QI / QM
• Human Resources; Recruitment	• TLJC
• IHS	• Yo-Tech

TRIBAL PUBLIC HEALTH SYSTEM STAKEHOLDERS BY ESSENTIAL SERVICE

ESSENTIAL SERVICE 9: Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
- Assessing the accessibility and quality of services delivered and the effectiveness of personal and population-based programs provided.
- Providing information necessary for allocating resources and reshaping programs.

• Administrative Executive Council	• Public Health Committee
• CNHS Leadership	• QI System
• Communications	• Quality Management
• Health Administration	• Tribal Council/Executive Leadership
• Health Finance	• Tribal/ Departmental leadership
• Healthy Nation	

ESSENTIAL SERVICE 10: Research for new insights and innovative solutions to health problems.
- Linkages with institutions of higher learning and research.
- Capacity to mount timely epidemiological and health policy analyses and conduct health systems research.

• Career Services	• IT/IS
• CDC	• State universities for Health Research
• CN-Education	• National Institutes of Health
• Epidemiology Services	• PH Leadership
• Healthy Nation	• QI
• Internal Review Board	• State Health Department
• IPC/CPCI	

Developing a Roadmap to Improvement through the NPHPSP

Cherokee Nation

Cherokee Nation (CN) provides public health services to more than 163,000 citizens of a 14 county tribal jurisdiction service area in northeast Oklahoma. Through funding from the Centers for Disease Control and Prevention (CDC) National Public Health Improvement Initiative (NPHII), CN completed the National Public Health Performance Standards Program (NPHPSP) state public health system assessment and conducted a tribal public health assessment. The Tribe self-rated the activities they provide related to delivering the ten Essential Public Health Services (EPHS).

Based on the assessment results, CN found that they are serving their community well in the deliver of services related to mobilizing community partnerships to identify and solve health problems (EPHS 4) and linking people to needed personal health services and assuring the provision of health care when otherwise unavailable (EPHS 7). Also based on the results, CN found that they wanted to improve services to their community around monitoring health status to identify community health problems (EPHS 1) and informing, educating, and empowering people about health services (EPHS 3).

From Data to Action

CN used the assessment results to plan for future public health initiatives and activities; these results have helped CN identify priority areas for consideration during the tribal public health strategic planning process. Based on the assessment results, CN has initiated multiple projects to improve EPHS delivery:

- *Epidemiology and Surveillance Division (EPHS 1 and EPHS 2)* - CN is developing an epidemiology and surveillance division to produce, collect, and publish resident specific health data. The new division would allow CN to generate their own health data and conduct investigations into health problems rather than relying on outside resources.

- *Digital Story Telling (EPHS 3)* - CN is developing a series of digital storytelling videos to offer additional programs that inform, educate, and empower the Cherokee people about current health issues. The videos combine CN health information with the Cherokee tradition of oral storytelling.

- *Tribal Health Improvement Planning (EPHS 5)* - CN plans to use the assessment results to guide the development of strategic priority areas and support tribal health improvement planning.

> Out of all the grants we have received in the 22 years I've worked at Cherokee Nation, NPHII has had the largest impact on public health infrastructure improvement by funding technical assistance and other learning opportunities.
>
> *Lisa Pivec, Cherokee Nation*
> *Community Health Promotion Director*

Success Factors

- Collaboration among clinical and preventative health staff helped break down silos

- Strong leadership support and a dedicated workforce

Essential Public Health Services (EPHS)

1. Monitor health status to identify community health problems
2. Diagnose and investigate health problems and health hazards in the community
3. Inform, educate, and empower people about health issues
4. Mobilize community partnerships to identify and solve health problems
5. Develop policies and plans that support individual and community health efforts
6. Enforce laws and regulations that protect health and ensure safety
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable
8. Assure a competent public health and personal health care workforce
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services
10. Research for new insights and innovative solutions to health problems

Related Links and Resources

- Cherokee Nation Health Nation - http://healthynation.cherokee.org

- NPHII Overview - www.cdc.gov/stltpublichealth/nphii

- NPHPSP Overview - www.cdc.gov/nphpsp

- Ten Essential Public Health Services - www.cdc.gov/nphpsp/EssentialServices

- NPHPSP Online Resource Center - www.phf.org/nphpsp

About NPHPSP and Public Health Foundation (PHF)

The NPHPSP is a national initiative that has developed a set of standardized goals for state and local public health systems and boards of health. PHF administers the NPHPSP Data Reporting Page, the Online Resource Center, and provides technical assistance on performance management, quality improvement, and workforce development.

Acknowledgements

NPHPSP

STRENGTHENING SYSTEMS, IMPROVING THE PUBLIC'S HEALTH

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In Closing……

- A Strategic Plan is a guide for both internal public health staff but also for all stakeholders (non-public health staff as well as community members)
- A Strategic Plan will allow a HD to track progress and promotes quality improvement
- A Strategic Plan will help strengthen a Tribe's public health infrastructure as well as its public health capacity

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Questions or Comments?

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