## Alexandria Health Department Strategic Priority # 1 Maintain a valued and professional workforce

	Topic	Goal 1.1 Achieve	Owner	Action Steps	7111-19	Aug. 19 Sep. 19 Oct. 19	401.19 06	19 7an 20	eb-20 Mar-20	No. 10	May Jun	20 Jul. 20 A	19.20 Set	2,20 00,20	Mov. 20	,20 7an	Feb. 27	Par. 22 Mar. 22 Mr.	34.22 Jun	22 July 22 Kug 22 Seb 23	Oct. 12 40	N.22	22 22 22 Fee	,22 Mar	,22 A21.22	May 22	,22 Jul.2	hugil seril
Workforce	Recruitment	"average "days to fill vacant positions" time of between 102-120 days by January, 2022	JC	1.1.1 Identify needed, key resources; implement/obtain same. 1.1.2 Review current processes & timeline for HR & hiring supervisors 1.1.3 Obtain input from Alexandria Health Department HR, VDH Office of Human Resources, and other Virginia Local Health Districts on hiring processes and bottlenecks 1.1.4 Create flowsheet to guide, and spreadsheet to track, key timelines for hiring mangers' actions throughout hiring processes; use system to increase transparency and communication 1.1.5 Update processes if needed. Train hiring managers in updated	5	X X	x	x		x		x		X		V												
				processes and use of spreadsheet.  1.1.6 Monitor; modify flowsheet if needed; review results  1.1.7 Use results to modify actions; if appropriate, create new goal for measuring recruitment  "vacancy-to-fill" time.  1.1.8 Utilize new tool (if modified in 1.1.6), monitor & report results		>				x		*		X		X	x	X	x	x			x					
Workforce	Retention	1.2 Create & implement mechanisms to improve understanding of turnover and enable informed response by April, 2021	JC	1.2.1 Obtain professional HR consultation re: effective exit interviews 1.2.2 Design and administer "why do you stay?" survey, analyze results 1.2.3 Conduct exit interviews (see 1.2.1); analyze results 1.2.4 Conduct periodic review of results of exit interviews; look for trends 1.2.5 Obtain industry standards and data from peer jurisdictions re: averages for staff turnover 1.2.6 Consider potential reclassifications of positions, adding career growth, if appropriate to business needs 1.2.7 Review and consider continued employee engagement			x	X			x			x	x			x x x	x		x	x			x x	x		
Workforce	Recruitment	1.3 Create & monitor system for utilization of recruitment incentive program by December, 2021		1.3.1 Obtain & review information about current utilization of incentives over which we already have control; discuss with hiring managers 1.3.2 Obtain approval from VDH Community Health Services to list incentives in job announcement(s) 1.3.3 Measure relationship between using incentives and improving recruitment 1.3.4 Ceate new goal for measuring impact of using incentives				x			x				×		x		x		x	x	x			x		
Workforce	Support	1.4 Create & implement program to obtain and utilize additional data about employee support/training by December, 2021	JC	1.4.1 Define what counts as "required" or "additional" training.  14.2 Measure dollars spent on training and number of trainings offered  1.4.3 Track who goes to which trainings via TRAIN  1.4.4 Identify professional trainings and resources for supervisors on how to be a supervisor  1.4.5 Create peer mentoring program for interested supervisors  1.4.6 Create clear processes for establishing training and orientation, including templates	9							x x x					x			x		x						
×	Support	1.5 Increase utilization of onboarding template to standartdize and improve new employee experience by April, 2022	SH	1.5.1 Create and conduct survey of supervisor utilization of template 1.5.2 Review & update checklist/template 1.5.3 Train supervisors on use of updated template 1.5.4 Obtain input from new employees re: perception (to date) of onboarding/supervision 1.5.5 Repeat survey to supervisors						x					x		x		x		x				X			

	Key
1st Priority	Darkest shade on priority & timeline, bold print
2nd Priority	Medium shade on priority & timeline, bold print
Subsidiary priorities	Light shade on timeline only, regular print
"X" in shaded box	month of completion or periodic review
shaded boxes, no "X"	work leading to completion
Owner	Initials of person leading work on that goal

## Alexandria Health Department Strategic Priority # 2 Be a trusted source of public health information and services

Topic	Goal	Owner	Action Steps	341.19	Aug-19 Ser	1,19 Oct.19	Mon. 19	19 720	20 tep	10 1.20 Mar. 20	70 M2	717.20 Jun	20 711.2	N19: 20 20 00	. 20 Nov	1.50 Dec	321.77	72 Nat. 7	Apr. 23	May 21	3ul	Aug.	serioculations	Dec. 7.7	327.22 F	Par. 22	Dr. 22 May	341.22	Juli 22 Aug. 22 Seb. 2
SS	2.1.1 Assure that systems are reviewed annually for responsiveness to community needs by January, 2022.	DB/ KXL	2.1.1.1 Use CHA/CHIP priorities in annual assessment of how program services may be able to address identified priorities; set action plans as indicated				x									x								×					
e <mark>rvice</mark> sivene	2.1.2 Assure that clinic delivery		2.1.2.1 Assure that all nurses are trained for blended clinic model				х																						
& Se	models are responsive		2.1.2.2 Implement blended clinic model 2.1.2.3 Develop updated client					х																					
ty Re	to community needs &		satisfaction surveys, both clinical & non-clinical 2.1.2.4 Conduct staff survey re:				x																						
<u>Informa</u> Communi	optimize both client care AND AHD	DB/	impact of blended clinic model on staff perception of effectiveness and efficiency									х																	
	resources	KXL	2.1.2.5 Review financials re: impact of blended clinic model														x												
			2.1.2.6 After CHA/CHIP completed, create and implement list of "no wrong door" priority screening questions and system to track if right referrals are being made consistently 2.1.2.7 Incorporate relevant portions of CDC "6/18" initiatives into workflow processes				x																						
	2.2 Results of VDH 2020		2.2.1 Conduct AHD internal audit			X	1																						
	audit (to be conducted		2.2.2 Implement corrective actions to reduce internal audit findings to					x																					
	in November 2020) will be no more than nine		single digits for entire agency  2.2.3 Continue cycle of "audit, find, correct, re-audit"								x									x							x		
ces	(9) findings overall.		2.2.4 Develop measure(s) to demonstrate effectiveness of EH programs																		×								
tion & Servitandards			2.2.5 Review all measures currently provided to City and/or VDH, assess priorities based on their congruence with Strategic Priorities; suggest adjustment as appropriate										x																
Information S			2.2.6 Create databases to capture needed information for studies/ reports  2.2.7 Create & pilot tracking system for near-adverse events					x										x											
			2.2.8 Develop peer review process for adherence to selected standards  2.2.9 Consider AHD readiness to initiate processes to obtain accreditation via the Joint Commission Standards for Ambulatory Care										x								×								
	2.3 Implement a functioning		2.3.1 Create a draft database				х																						
ports	tracking database for	SH	2.3.2 Catalog all reports and determine periodicity of review							x												х				х			x
Re	public reports by December 31, 2021.		2.3.3 Create a process for review and a set of explicit standards to which reports must comply													х													
Servic	2.4 Make decision		2.4.1 Perform cost-benefit analysis of																										
tion & S editatio	about pursuing PHAB	SH	PHAB accreditation																		X								
Information Accred	accreditation by July 31, 2022.		2.4.2. Make decision about pursuit of PHAB accreditation in subsequent strategic plan cycle																										×
ह	2.5 Increase percent		2.5.1 List types of potential additional										х																
dentials	credentialed staff with	RS/DB	credentials 2.5.2 Explore funding mechanisms										^			х								+					
Cred	credentials beyond EWP by July 2022		2.5.3 Create database to capture continuing acquisitions of staff														x												

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## Alexandria Health Department Strategic Priority # 3 Support conditions that protect and promote community health and well-being

Topic	Goal	Owner	Action Steps	Jul	19 Aug. 19 Set	2,19 00	129 NOV.19	ec. 30	n.70	0.20 Mar. 26	0 AD1.20	104.20 104.20	711.7	O MIGN	o n	o ct. 1	o you de	,20 Jan	L'A Kebi	Nar.22 Apr	, 21 Mai	4.22 June	21/22	,119.22 Se	00, 5, 40	1.23 Dec	,22 32n	in hand	Mar. 22 Mar. 22	1.22 N	24.22 Jun.22 Jul.	22 Aug, 27	serizi
	3.1 Create and		3.1.1 Fill Population Health Manager vacancy				х																										
	implement action plan for population		3.1.2 Create Organizational Structure for Population Health Division							х																							
Health	health program by June 30,		3.1.3 Create goals and guiding principles of Population Health Division							х																		$\perp$		L			
II Being Llation	2020	SH	3.1.4 Conceptualize possible resources, additional positions needed and implement as able					┖																									
& Wel			3.1.5 Facilitate development of Alexandria Community Health Improvement Plan (CHIP)				х																										
Health			3.1.6 Support and facilitate implementation of Alexandria's CHIP					х				x						х				х					х	$\perp$			х		
unity	3.2		3.1.7 Consider amending schedule for Community Health Assessment						<u> </u>																								
Сош	Institution- alize referra system to	1	3.2.1 Initiate viable database to capture & update referral information														х																
rrals	optimize client care	KXI	3.2.2 Assign database maintenance to specific position 3.2.3 Disseminate updated								х																		'	<u> </u>	<u> </u>		
Refe	and break down silos by	IXXE	community referral networks to partners and community					L				x	Ш		x		×		Ц	x		х		×		Х		x		L	х		×
	December, 2020		3.2.4 Strengthen communication with partners to maximize opportunities for action																														
EM )	3.3.1 Achieve PPHR re-	2	3.3.1.1 Complete PPHR Accreditation application	X																													
ent (PH	accreditation 3.3.2 Achieve		3.3.1.2 Address findings as required 3.3.2.1 Health Director, Business Manager & City Fiscal Officer discuss &	x		X		+																				+					$\exists$
3eing 1anagem	stabilized funding for al positions by July 1, 2020		plan 3.3.2.2 Submit required documents to City by required deadline				X																										
/ Health & Well I	3.3.3 Assess community readiness reliability by October, 2020		3.3.3.1 Measure community readiness, e.g., define "active member" of MRC													x																	
nmunit) ships	3.4 Create and implement		3.4.1 Review and update current list of partner groups and meeting schedules		×																												
Con	methodology for establishing		3.4.2 Create and implement Partner and Meeting Database(s)			х				х				х				х				х			х				х	$\vdash$			x
ınity Pa	and maintaining partnerships	SH	3.4.3 Update AHD priorities based on analysis (CHA/CHIP and internal Subject Matter Experts)									x																					
nmmo	by December 31, 2020		3.4.4 Develop criteria for maintaining/adding partnerships 3.4.5 Identify partnerships that					1								х												$\blacksquare$		_			
O O			need restructuring																	Х										<u></u>			

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## Alexandria Health Department Strategic Priority # 4 Provide internal systems that deliver efficient, dependable and responsive support

opic	Goal	Owner	Action Steps	Jul-19	kno.18	bird Oct	79 Non. 18	201.70	b.30 Mar	30 VS. 30	May 20 117	3ul-20 Au	3,20 20 Sep. 10	001.70	AOV. POC	20 22	tep. 51 Mar.	73 / YJ	May. 22	711.7	ry And J	sex, oct.	Hony	Dec. 73	in head	Mar	21 /22	May	M. 33 M. 37 Mag.	22 / Sed
ор.с	4.1 Develop and maintain		4.1.1 Inventory all internal communication																										111	
_	effective internal		systems / platforms and the purpose for which they are used										х																	
atior	communica- tion systems by December,		4.1.2 Determine which systems are required regardless of their effectiveness, and which are optional														Y													
unic	2022	KXL	4.1.3 Create system to evaluate utilization and/or effectiveness of each														Х													
отп			4.1.4. Determine which systems to use and which to delete or allow to become dormant 4.1.5 Develop utilization criteria for each of																х											
O			the items that will be used 4.1.6 Communicate outcome to staff																				X						+	
			4.1.7 Monitor for actual utilization and effectiveness, adjust as needed																					x						
	4.2 Install EHD and Bandwidth		4.2.1 Create monitoring & reporting/review system (EHD)				X																						+ + + +	
sms	Improve- ments;		4.2.2 Implement EHD reporting/review system								х																			
Syste	Implement monitoring/	JC	4.2.3 Create monitoring & reporting/review system for implementation of greater bandwidth			×																								
ata (	reporting system by June 2020		4.2.4 Implement expanded bandwidth system				х																							
	Julie 2020		4.2.5 Create monitoring & reporting/review system for data filing system (Cloud)																											
			4.2.6 Implement Cloud system																											
ating OP's)	4.3 Develop and inventory all necessary SOPs		4.3.1 Inventory all current SOPs and Guidance Documents		X																									
Opera es (SC	and Guidance documents by	SH	4.3.2 Identify which current SOPs and Guidance documents to keep, which to abolish,		^		V																							
aara edure	October, 2021	311	and which are missing and need to be created 4.3.3 Revise all SOPS and Guidance Documents as indicated (see 4.3.2)				X		х																				+ + + +	
Stand			4.3.4 Create and implement new SOPs and Guidance Documents that were identified as														x													
<u>۔ رہ</u>	4.4 Undertake		being needed														^								+				+++	
ment	improvement projects only if		4.4.1 Determine team compositions for 2020 QI projects					x																						
rove	they align with strategic plan AND CQI		4.4.2 Continue use of QI panel to guide teams in completing strategic plan-oriented QI projects																											
Impr	principles (effective	KXL	4.4.3 CQI panel guides/assesses project progress annually						х		х		х		х		х		Х			x	x			Х		х		Х
Quality	January 2020)		4.4.4 Measure number of projects completed in support of strategic plan and percent of staff involved annually																											

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