

Connecticut Department of Public Health

Strategic Map Update 2017-2018

Addendum 3 to Agency Strategic Plan 2013-2018



The Connecticut Department of Public Health

Strategic Map Update

2016-2018

February 1, 2017 – December 31, 2018

Background and Introduction

The Connecticut Department of Public Health developed its first Strategic Map in 2011. This first map was finalized on April 11, 2012 and incorporated into a formal agency Strategic Plan in effect from 2013-2018. The Strategic Map is the foundation for the formal agency Strategic Plan and implementation of agency strategic planning efforts. It is updated annually as part of the agency's continuous strategic planning process.

The strategic plan and subsequent updates to the map are available on the agency intranet as follows:

- Strategic Map 2017
- Agency Strategic Plan 2013-2018
- Addendum 1 to the Agency Strategic Plan (2014-2015)
- Addendum 2 to the Agency Strategic Plan (2015-2016)

This document serves as "Addendum 3 to the Agency Strategic Plan 2013-2018". It describes the third round of updates made to the Strategic Map by staff and managers from around the agency (Appendix A), including members of the Public Health Strategic Team (PHST) (Appendix B). The group used the following process to update the map:

- On February 7, 2017 participated in a facilitated, half-day session to update the map. The team again reaffirmed the mission, vision and values, and modified the central challenge. They adapted the strategic priorities and objectives as described in the main body of this document.
- Submitted the revised strategic map for review and approval by Branch Chiefs, the Commissioner and Deputy Commissioner at a meeting on December 1, 2017.
- Incorporated changes suggested by the Branch Chief's and finalized the map on December 17, 2017.

Next steps include the following:

- The PHST will assist with implementation and monitoring progress of committees or work groups carrying out priority objectives.
- DPH will revisit the map annually, report on progress and update the map as needed.
- The full Strategic Plan, including mission, vision, and values, will be formally revisited and updated in 2018

Overview of Updates to the Strategic Map

The Central Challenge has been altered to better represent the range of methods with which DPH supports the population of Connecticut. The updated Strategic Map modifies the previous Central Challenge (Improve Population Health in Connecticut Through Leadership, Expertise, partnerships and Focus) to:

Improve Population Health in Connecticut Through Engagement, Innovation, Expertise, Leadership and Action

The Strategic Priorities remained the same except for one Strategic Priority that was modified. Strategic Priority C: Reduce Health Disparities for SHIP-6/18 Key Health Indicators replaced the previous Strategic Priority C (Build Strategic Partnerships to Improve the Public Health System) to align the agency's Strategic Plan with HealthyCT 2020 strategies and the CDC 6|18 Initiative. The previous Strategic Priority C is now an adapted objective under Strategic Priority A: Strengthen Approaches and Capacity to Improve Population Health.

The updated Strategic Priorities are:

- A – Strengthen Approaches and Capacity to Improve Population Health**
- B – Ensure Quality, Reliable, and Accessible Health Information**
- C – Reduce Health Disparities for SHIP-6/18 Key Health Indicators**
- D – Foster and Maintain a Competent, Healthy, Empowered Workforce**
- E – Build a Sustainable, Customer-Oriented Organization**

Cross Cutting Priorities were reviewed and a third Priority was added. A previous Strategic Objective became Priority H: Promote the Value and Contributions of Public Health. The updated Cross Cutting Priorities are:

- F – Foster a Culture of Performance Management and Quality Improvement**
- G – Champion a Culture of Health Equity**
- H – Promote the Value and Contributions of Public Health**

The three Cross Cutting Priorities are depicted at the bottom of the Strategic Map indicating that they are foundational for all efforts to implement the Strategic Map, that they are embedded in actions to implement all other strategic priorities, and that no plans to implement the other strategic priorities will be considered complete unless they include an emphasis on performance management and quality improvement, health equity and promoting the value and contributions of public health.

The Objectives depicted in boxes under each Strategic Priority describe the key actions that will be taken to carry out these strategies. The Objectives are listed in order of importance as assigned by the agency through a voting process and additional discussion. It should be noted that the Strategic Mapping participants were judicious in selecting priority objectives in deliberate effort to be strategic in its focus rather than comprehensive.

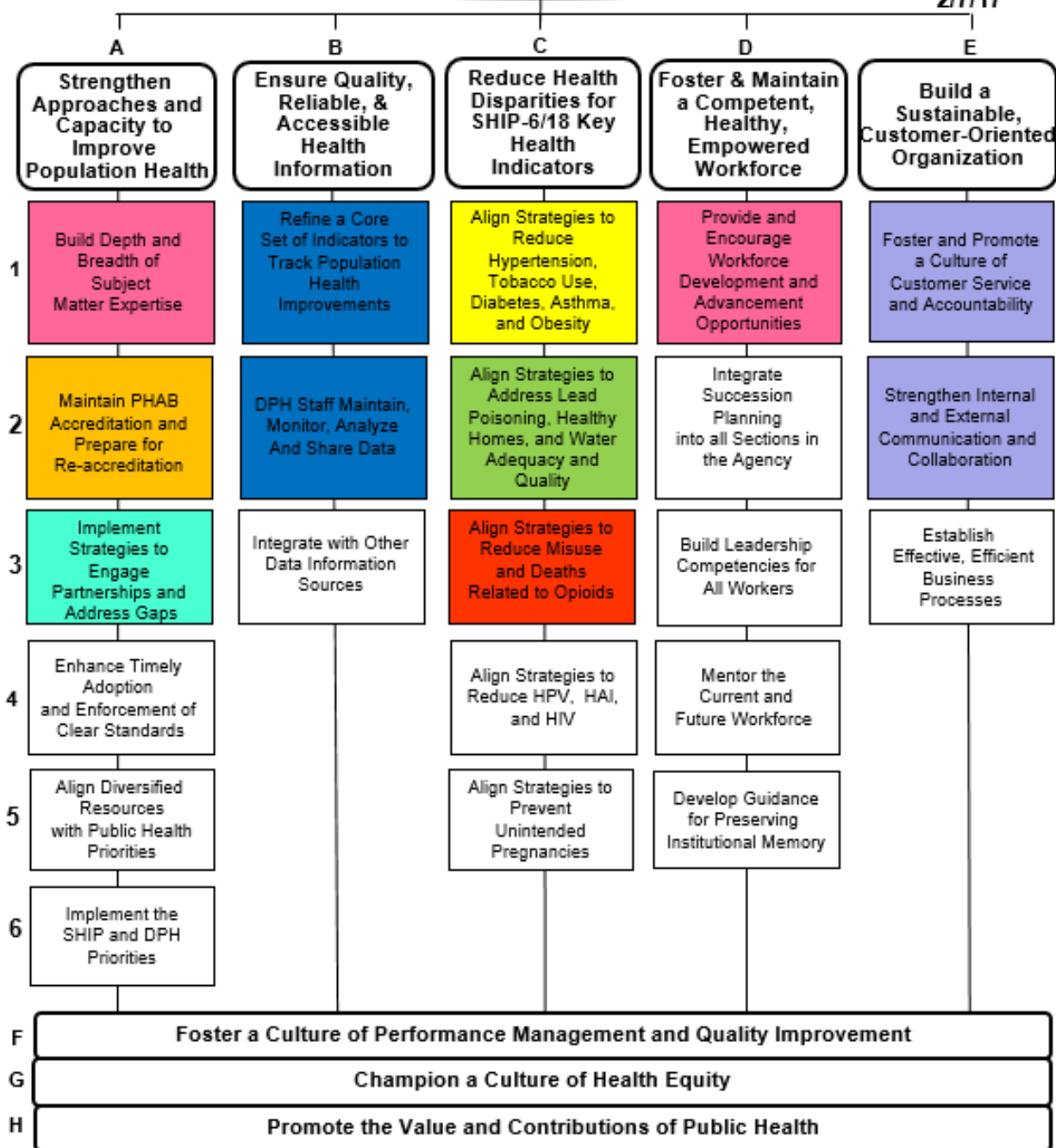
Objectives/boxes in color are those for which activity is anticipated in the current year. Boxes that are the same colors are considered tracks of work that align with one another and will likely be addressed by

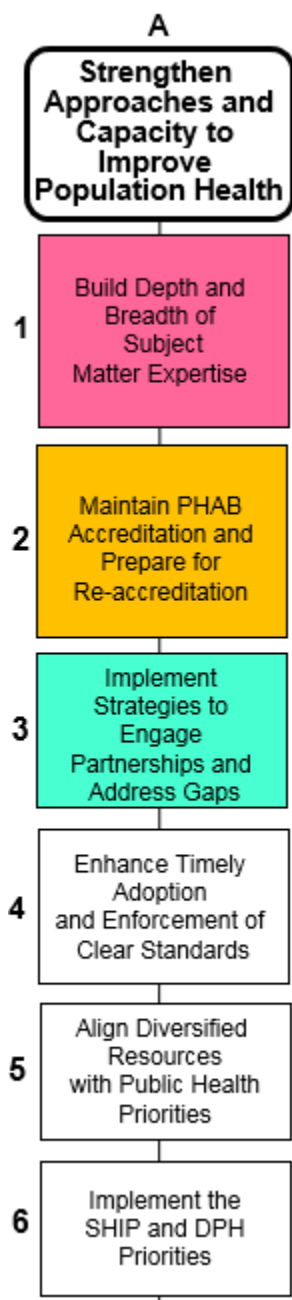
the same group, committee or program. White Objectives/boxes represent areas of importance but ones that will not receive additional emphasis in the current year via the establishment of a committee or new initiatives. Objectives for the Cross Cutting Priorities will be identified by work groups or programs as assigned. Each Strategic Priority is briefly described in the following pages.

Connecticut Department of Public Health Strategic Map: 2017-2018

Improve Population Health in Connecticut
Through Engagement, Innovation, Expertise,
Leadership And Action

Revised
2/7/17





Strategic Priority A: Strengthen Approaches and Capacity to Improve Population Health

Omitted Objectives: A6: Promote the Value and Contributions of Public Health. This was omitted as an objective and added as a Cross Cutting Priority because it was agreed that as an objective, it is underemphasized and needs to be further promoted.

Maintained Objectives

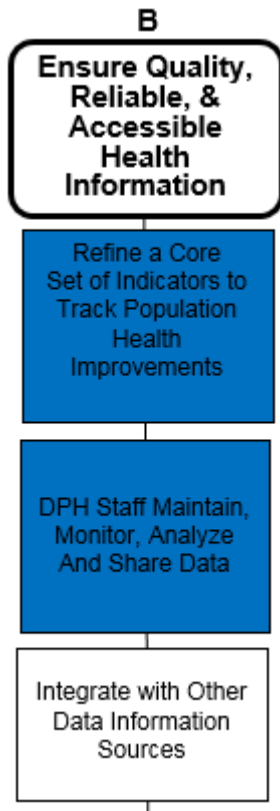
- A1:** Build Depth and Breadth of Subject Matter Expertise
- A5:** Align Diversified Resources with Public Health Priorities (previously A4)
- A6:** Implement the SHIP and DPH Priorities (previously A3)

Adjusted Objectives:

After receiving accreditation status, A2 was adjusted to “Maintain PHAB Accreditation and Prepare for Re-accreditation”.

A3 became “Implement Strategies to Engage Partnerships and Address Gaps”, which is an adaptation of what was previously Strategic Priority C: Build Strategic Partnerships to Improve the Public Health System.

A4 is an adaption of the previous A5 and is now “Enhance Timely Adoption and Enforcement of Clear Standards”. The language change and priority upgrade is primarily due to the results of the PHAB Accreditation Site Visit, which cited evaluation of enforcement programs as an area in need of improvement.



Strategic Priority B: Ensure Quality, Reliable, & Accessible Health Information

Omitted Objectives

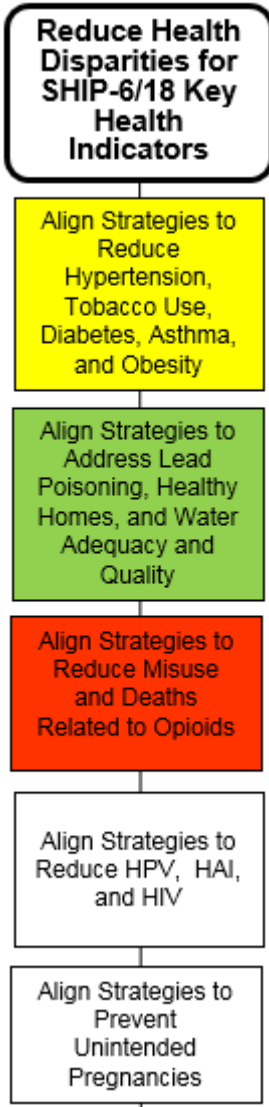
B3: Conduct NPHPS to Determine State Public Health System Data Capacity. It was agreed upon that the activities for this objective should be integrated with the new B3: Integrate with Other Data Information Sources (previously B2: Align with Other Data Information Sources)

Maintained Objectives

B1: Refine a Core Set of Indicators to Track Population Health Improvements

B2: DPH Staff Maintain, Monitor, Analyze and Share Data (previously B4)

C



Strategic Priority C: Reduce Health Disparities for SHIP-6 | 18 Key Health Indicators

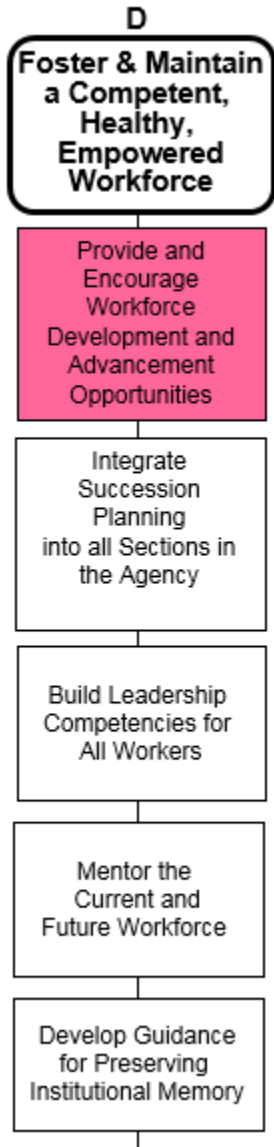
The previous Strategic Priority C is now an objective with the same name under Strategic Priority A. The new Strategic Priority C is “Reduce Health Disparities for SHIP-6/18 Key Health Indicators”. Making this a Strategic Priority establishes a linkage between the State Health Improvement Plan (SHIP) and the Strategic Plan. In addition to carrying over the SHIP 2017 Action Agenda priorities, this Strategic Priority also reflects the CDC’s 6 | 18 initiative and notes it is a priority for DPH.

Omitted Objectives

- C1:** Identify, Recruit & Collaborate with Traditional and Non-traditional Partners
- C2:** Align & Foster Existing Committees to Support Public Health Systems Improvement
- C3:** Develop Communication Plan with External Partnerships
- C4:** Build Collaborations with DPH

New Objectives

- C1:** Align Strategies to Reduce Hypertension, Tobacco Use, Diabetes, Asthma, and Obesity
- C2:** Align Strategies to Address Lead Poisoning, Healthy Homes, and Water Adequacy and Quality
- C3:** Align Strategies to Reduce Misuse and Deaths Related to Opioids
- C4:** Align Strategies to Reduce HPV, HAI, and HIV
- C5:** Align Strategies to Prevent Unintended Pregnancies



Strategic Priority D – Foster and Maintain a Competent, Healthy, Empowered Workforce

This strategic priority recognizes that our workforce is our greatest asset and that training, empowerment, and worksite wellness opportunities are vital to the agency’s success in being a high performing organization capable of achieving our mission and this central challenge.

Maintained Objectives

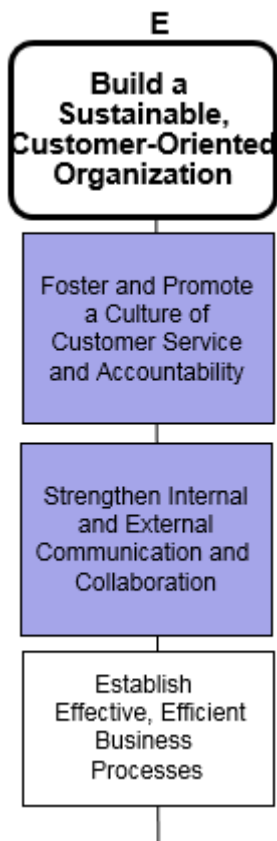
- D2:** Integrate Succession Planning into all Sections in the agency
- D4:** Mentor the current and future workforce (previously D3)

Adapted Objectives

D1: Provide and Encourage Workforce Development and Advancement Opportunities. The language modification in this objective is intended to stimulate programs to support staff to take advantage of the workforce development and advancement opportunities already offered at the department.

New Objectives

- D3:** Build Leadership Competencies for All Workers
- D5:** Develop Guidance for Preserving Institutional Memory



Strategic Priority E – Build a Sustainable, Customer-Oriented Organization

This strategic priority reflects the importance of meeting our customer’s (internal and external) expectations and responding to their needs. The initial workgroup discussed internal collaboration, stewardship and sharing vs. ownership.

Omitted Objectives

E4: Strengthen Intra-Department Collaboration. It was agreed that this objective could be integrated into E2: Strengthen Internal and External Communication (previously E3)

Maintained Objectives

E1: Foster and Promote a culture of customer service and accountability (previously E2)

E2: Strengthen Internal and External Communication (previously E3)

E3: Establish Effective, Efficient business processes (previously E1)

Cross Cutting Strategic Priority F

F

Foster a Culture of Performance Management and Quality Improvement

After a vote, this Cross Cutting Priority remained the same. It was cited as both a strength and weakness in the PHAB Accreditation Site Visit Report and everyone agreed it should be foundational to how we do our work at DPH.

Cross Cutting Strategic Priority G

G

Champion a Culture of Health Equity

The language will remain the same for this Strategic Priority. It was identified as an agency strength in the PHAB Accreditation Site Visit Report and it has been agreed upon that work must continue on integrating health equity in every DPH program and administrative action.

Cross Cutting Strategic Priority H

H

Promote the Value and Contributions of Public Health

This is a new Cross Cutting Strategic Priority and was added due to the importance of strengthening both the general public's knowledge and appreciation of public health and the governing entity/legislative's understanding of the significance of public health. Previously a Strategic Objective under Strategic Priority A: Strengthen Approaches and Capacity to Improve Population Health, it is now Cross Cutting Strategic Priority H.

Appendix A – 2017 Strategic Planning Update Participants

Yvonne	Addo	Deputy Commissioner
Chukwuma	Amechi	Fiscal Office
Chantelle	Archer	Public Health Systems Improvement
Joan	Ascheim	Public Health Systems Improvement
Diane	Aye	Population Health Statistics and Surveillance
Ellen	Blaschinski	Operational and Support Services
Marie-Christine	Bournaki	Community, Family Health and Prevention Section
Janet	Brancifort	Deputy Commissioner
Michael	Carey	Human Resources
Brian	Carney	Office of Health Care Access
Matt	Cartter	Infectious Disease Section
Marjorie	Chambers	Community, Family Health and Prevention Section
Raffaella	Coler	Office of Emergency Medical Services
Carmen	Cotto	Office of Health Care Access
Jeffrey	Curran	DPH Laboratory
Mehul	Dalal	Community, Family Health and Equity
Randy	Domina	Public Health Systems Improvement
Abdi	Elmi	Fiscal Office
Juanita	Estrada	Local Health Administration
Sandra	Gill	Public Health Systems Improvement
Christine	Hahn	Regulatory Services
Susan	Isch	DPH Laboratory
Monica	Jensen	Community, Family Health and Equity
Belinda	Jivapong	Public Health Systems Improvement
Elise	Kremer	DPH Laboratory
Jonathan	Lillpopp	Health Care Quality and Safety
Valerie	Maignan	Office of Public Health Preparedness and Response
Kim	Martone	Office of Health Care Access
Lori	Mathieu	Drinking Water Section
Richard	Melchreit	Healthcare Associated Infections Program
Susan	Morin	Administrative and Scientific Support Services
Anthony	Muyombwe	DPH Lab – Biological Services
Raul	Pino	Commissioner
Jane	Purtill	Vital Records
Jafar	Razeq	DPH Laboratory
Kaila	Riggott	Office of Healthcare Access
Daniel	Schwartz	Infectious Disease
Leslie	Scoville	Legal Office
Kelly	Sinko	Office of Policy Management
Kristin	Sullivan	Public Health Systems Improvement
Ahmadali “Alex”	Tabatabai	Regulatory Services
Melissa	Touma	Public Health Systems Improvement
Krista	Veneziano	Regulatory Services
Bruce	Wallen	Contracts and Grants Management Section
Katie	Young	Office of Public Health Preparedness and Response

Appendix B – Public Health Strategic Team 2017-2019

Yvonne	Addo	Deputy Commissioner
Diane	Aye	Population Health Statistics and Surveillance
Janet	Brancifort	Deputy Commissioner
Marianne	Buchelli	Infectious Diseases
Brian	Carney	Office of Health Care Access
Stewart	Chute	Regulatory Services
Christine	Hahn	Regulatory Services
Monica	Jensen	Community, Family Health and Equity
Jonathan	Lillpopp	Health Care Quality and Safety
Lori	Mathieu	Regulatory Services
Raul	Pino	Commissioner
Dan	Schwartz	Infectious Diseases
Leslie	Scoville	Legal Office
Katie	Shuttleworth	Community, Family Health and Equity
Ahmadali “Alex”	Tabatabai	Regulatory Services
Katie	Young	Office of Public Health Preparedness and Response