2017-2020
Strategic Plan

Fairfield Department of Health • 1550 Sheridan Drive, Suite 100 • Lancaster, Ohio 43130
(740) 652-2800 • www.myfdh.org
Memo from the Administrator

Dear community member/partner:

I am pleased to present the 2017-2020 Strategic Plan of Fairfield Department of Health (FDH), which is the culmination of strategic planning efforts among all health department staff and Board of Health members. This plan articulates our shared mission, vision, and values/guiding principles by which we operate. In addition, this plan serves as a roadmap of strategic priorities, objectives, and goals which will help us to achieve our mission of “serving the Fairfield County community by preventing disease, protecting the environment and promoting healthy lifestyles.”

This year, the release of the Fairfield County Community Health Assessment & Improvement Plan (CHACHIP) provided a wealth of information about the health needs of County residents and strategies underway by community partners, as part of a community-wide strategic planning process. FDH is fortunate to have many partners engaged in advancing the health and safety of County residents. Through the strategic planning process, FDH staff and Board of Health members considered the changing health needs of the County, progress made towards implementing the 2014-2017 Strategic Plan, and feedback gathered from among clients (through a client survey) and employees. The community health priorities, as well as existing data, led to the identification of three strategic priorities among FDH staff and Board of Health members: 1) Increasing the awareness of public health services among residents and partners; 2) Strengthening the public health workforce by recruiting and retaining effective employees; and 3) Refining health department policies and procedures for enhanced clarity on health department operations.

In recent years, public health departments nationally have been challenged to face emerging health threats, such as Zika and Ebola, amid funding and other legislative changes. Fairfield County has had its own challenges, such as, the largest Botulism outbreak in forty years! As highlighted in this plan, FDH remains committed to providing high quality services to all Fairfield County residents. This plan not only outlines our strategy to not only survive, but thrive while facing the future riptides and challenges in the public health community!

In good health,

Larry Hanna, Administrator
lhanna@co.fairfield.oh.us
(740) 652-2800
Review and Maintenance of the Strategic Plan

The Fairfield Department of Health Strategic Plan was adopted by the Board of Health on April 12, 2017. A hard copy of this plan will be kept in Administrative Assistant’s office. An electronic copy will be available to staff on the FDH shared drive in the Strategic Plan Folder. A modified copy of this plan will be posted on the FDH web site for public viewing. The modified copy will not contain the Appendices Section. This document will be reviewed biannually unless additional updates are required. A member of the review team will add the review date and any changes in the table below.

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Introduction

Fairfield County Overview

Located in the Columbus Metro Area, Fairfield Department of Health (FDH) promotes and protects the health of Fairfield County (comprised of roughly 146,156 residents and 39,846 families). Fairfield is the descriptive name given to the County in reference to the beauty of its fields. The County also lines along scenic Hocking Hills, and includes a portion of Buckeye Lake. The topography of the county, which was once glaciated, consists of a fairly flat northern region with the foothills of a mountainous Appalachian area near the village of Carroll.

According to the 2010 census, the racial makeup of the county consists of 90.2% white, 6.0% black or African American, 1.1% Asian, 0.2% American Indian, 0.6% from other races, and 1.9% from two or more races. Those of Hispanic or Latino origin made up 1.7% of the population. The median income for a household in the county was $56,796 and the median income for a family was $65,835.

Community Health Assessment (CHA) and Improvement Plan (CHIP)

In mid-summer of 2016 FDH, in collaboration with a broad range of community partners, began development of a comprehensive Community Health Assessment (CHA). The CHA used both primary and secondary data to identify the top health issues facing County residents. Once the CHA was completed in the fall of 2016, FDH, with its partners, worked to develop a Community Health Improvement Plan, which outlines the community’s strategic plan to address three health priorities:

- Improving adult, youth, and child mental health
- Decreasing adult and youth substance abuse
- Decreasing adult, youth and child obesity

The CHIP was completed in January of 2017; both the CHA and CHIP can be viewed on our website at www.myfdh.org.

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Strategic Plan Overview

Strategic Planning Definition
The Public Health Accreditation Board (PHAB) defines strategic planning as "a disciplined process aimed at producing fundamental decisions and actions that will shape and guide what an organization is, what it does, and why it does what it does. The process of assessing a changing environment to create a vision of the future; determining how the organization fits into the anticipated environment, based on its mission, strengths, and weaknesses; then setting in motion a plan of action to position the organization."

An organizational strategic plan provides a local health department (LHD) and its stakeholders with a clear picture of where it is headed, what it plans to achieve, the methods by which it will succeed, and the measures to monitor progress. It is a leadership tool grounded in decisions the organization has made about strategic priorities for the near future (usually the next three to five years). The plan communicates these priorities and provides a basis for future decision-making.

FDH’s Strategic Planning Approach

2014-2017 Strategic Plan
FDH’s 2014-2017 Strategic Plan, was developed by extending bimonthly accreditation team meetings to include strategic planning beginning in March 2014. During these meetings the workgroup explored crucial questions; defined the principles and beliefs that guide FDH as an agency; reviewed the services FDH offers; assessed the external conditions that the agency must respond to and determined the internal structure necessary to organize and support the agency. NACCHO’s Strategic Planning Guide was used as a framework to guide staff through each of the six modules. Staff participation was incorporated through email surveys (Developing Mission, Vision and Values) and a staff meeting presentation (Strategic Planning). On May 21, 2014, an all staff workshop was held to define strategic priorities for the Department to set strategic goals and identify divisional objectives to support the strategic goals. Work continued for the 3 months following the workshop as the Strategic Goals and corresponding objectives were further clarified and defined. The resulting 2014-2017 Strategic Plan provided the department’s revised vision, mission, values, a SWOT, and strategic priorities to address over the plan period (9/1/2014 – 8/31/2017). It also provided a valuable opportunity for staff to learn and experience the strategic planning process.

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2017-2020 Strategic Planning Process

In recent years, FDH has experienced many changes, including reorganization, fiscal stabilization, a move to a new facility and began the shift to a public health framework based in assessment, assurance, and policy development as it started on the road to accreditation. Through the strategic planning process, FDH developed strategies which would leverage its strengths to address opportunities and threats. Most notably, FDH’s strong partnerships within the community have extended the reach of the health department to collect extensive data which informed the development of community health improvement goals. FDH is fortunate its partners not only shouldered much of the financial burden to develop the plan, but are engaged with its implementation. Two examples of ways in which FDH is responsible for Community Health Improvement Plan (CHIP) initiatives include: 1) Obesity and Childcare Meal Planning (led by FDH’s Nursing Director) and 2) WIC initiative to improve nutrition among clients.

Since the development of the 2014-17 Strategic Plan, the completion of the Community Health Assessment and Improvement Plan (CHA and CHIP), enabled health department staff to identify alignment between the health department’s current programs and services with the health needs of the community. Recognizing that the health department represents one organization of many involved with the implementation of the CHIP, through the strategic planning process, FDH examined in which ways it could most effectively contribute towards improving the health of the community, given current state/federal/other resources and current reporting requirements.

In addition to the completion of the CHA & CHIP, FDH was also able to tap into primary data collected just prior to the strategic planning session from among both employees and clients. Both sets of surveys provided valuable input to assess the current state of the health department and shape future goals.
A strategic planning session was held among all staff and two Board of Health members on February 15, 2017. During the session, progress towards achieving the 2014-2017 Strategic Plan goals and objectives was reviewed. A timeline of the 2014-2017 strategic planning process was shared to provide context during the development of future goals, particularly for new staff and Board of Health members.

This plan represents the culmination of FDH’s 2017-2020 strategic planning cycle. It builds upon the 2014-2017 Strategic Plan, by considering and integrating the CHA & CHIP data and plans, with feedback collected among employees and clients. It is intended to serve as a roadmap to outline future goals and objectives, and to serve as a “living” document, which will be monitored and updated, based on the changing health needs of Fairfield County residents and/or changes to funding/requirements.

**Mission, Vision and Values Statements**

The backbone of the strategic plan is an organization’s mission, vision and values statements. They communicate the overall purpose of the agency and a shared sense of inspirational direction. In its guide for strategic planning, the National Association of County and City Health Officials (NACCHO) define these terms as follows:  

- **Mission**: The organization’s purpose; what the organization does and why.
- **Vision**: Futuristic view regarding the ideal state or conditions that the organization aspires to change or create.
- **Values**: Principles, beliefs and underlying assumptions that guide the organization.

During the February 2017 Strategic Planning Session, FDH reviewed its current mission, vision, and value statements. Many of those in attendance recalled participating in a survey which was conducted among all staff to establish the mission, vision, and value statements developed in 2014. Participants were asked to review the statements for relevancy, that is, given the diverse services and programs provided by FDH staff, does each statement still reflect the health department’s overall purpose and shared vision for the future.

Those in attendance confirmed that the mission and vision statements were both representative of their unique role and comprehensive to reflect the department as a whole. No changes were made to the mission and vision statements, which are reflected below.

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Mission:
The Fairfield Department of Health is committed to serving the Fairfield County community by preventing disease, protecting the environment and promoting healthy lifestyles.

Vision:
The Fairfield Department of Health foresees the day when people realize that being healthy is a lifelong process involving personal choice, self-awareness and a shared community responsibility.

Values:
FDH reviewed its core values and principles under which it operates. Staff felt that while the nine values were still representative of the health department, they could be refined so that they would be easier to remember and communicate to others.

- **Service:** Serve in a courteous, compassionate, and responsive manner
- **Integrity:** Adhere to a code of standards that includes honesty, fairness, openness, respect and sound judgment
- **Leadership:** Inspire others toward excellence
- **Consistency:** Uniformly apply policies and processes
- **Accountability:** Accept responsibility for accuracy, efficiency, and effectiveness of actions
- **Communication:** Promote interactions with all stakeholders and continually share information in a timely fashion
- **Knowledge:** Continually acquire new information to understand public health practices.
- **Diversity:** We value and respect diversity and recognize the benefit it brings in understanding and serving all people.
- **Collaboration:** We work collaboratively with partners and communities to improve health and support a strong public health system

The nine values identified in the 2014 Strategic Plan, were consolidated as follows:
Environmental Scan and SWOT Analysis

An environmental scan was conducted as part of the strategic planning process by considering both internal and external data collected among residents, clients, and FDH staff. This information was used to assess FDH’s performance which led to the development of a Strengths, Weaknesses, Opportunities, and Threats (SWOT) Assessment conducted during the February 15, 2017 strategic planning session.

Community Health Assessment & Improvement Plan Overview

In order to assess the broader health needs of the community and discuss the community’s strategic planning process, a presentation of the Fairfield County Community Health Assessment & Improvement Plan (CHACHIP) (see Appendix D, CHACHIP Executive Summary, for additional information) was provided by the Nursing Director. The process used to gather primary and secondary data in order to develop a robust community health assessment was shared, along with an overview of the three strategic priorities identified through the Community Health Improvement Plan, which resulted together, resulted in the development of a Community Health Assessment & Improvement Plan (CHACHIP). The CHACHIP contains three strategic priorities:
1. Adult, Youth and Child Mental Health
2. Adult and Youth Substance Abuse
3. Adult, Youth, and Child Obesity

As an active member and driver of the community health improvement process, an overview of the contributions of the health departments to implement the CHIP were shared, both of which address the CHACHIP’s Strategic Priority #3: To reduce adult, youth and child obesity. The two initiatives underway by FDH focus on: 1) Obesity and childcare meal planning and 2) Nutrition planning offered through the WIC program. While FDH serves as a convener for the collective process used to mobilize partners to address health issues facing Fairfield County, FDH discussed the importance of aligning the health department’s strategic plan with that of the community in order to maximize its impact to improve health status.
**Client Survey**

In addition to these presentations, FDH staff and Board of Health members also reviewed data analyzed from external clients which were collected as hard copy surveys in waiting rooms. A total of 98 surveys were collected among clients visiting environmental health, birth/death certificate, administration, nursing, and WIC programs. Clients were asked ten questions about the courtesy of staff (97.9% rated as “excellent”), speed of response to requests made (92% rated as “excellent”), overall satisfaction (94.9% rated as “excellent”), and the convenience of the hours of operation (96% rated the hours as “convenient”). For additional information, see Appendix E: Client Survey Results.

**Employee Survey**

Finally, FDH also discussed data collected internally through its employee satisfaction survey. While the survey contained ten questions, four of the lowest scoring questions were discussed in greater detail:

- “How do you feel about the Quality of Supervision at the Fairfield Department of Health?” (34.78% rated as “Fair”)
- “How would you rate the Wages/Benefits that are offered by the Fairfield Department of Health?” (43.48% rated as “Fair”)
- “How would you rate the Working Environment at the Fairfield Department of Health?” (43.38% rated as “Fair”)
- “How would you rate the communication within your organization with Administration?” (39.13% rated as “Fair”)

Overall feedback while reviewing the results of the employee survey reflected that, given low turnover rates, employees are pleased with the working environment at FDH. The health department may be limited in its ability to provide additional wages/benefits, but could do more to maximize internal communication, particularly across programs. For additional information, see Appendix F: Employee Survey Results.

**Strengths, Weaknesses, Opportunities and Threats (SWOT) Assessment**

After reviewing the community health improvement priorities identified in the CHACHIP, and FDH’s contributions towards achieving community goals, as well as feedback collected externally (through the client survey) and internally (through the employee survey), FDH staff and Board of Health members engaged in a Strengths, Weaknesses, Opportunities, and Threats (SWOT) Assessment. The SWOT was conducted to further expound upon data collected collectively among staff, in order to identify areas of strength which could be harnessed to address weaknesses, tap into existing opportunities, and combat threats. The SWOT Assessment was conducted using affinity diagrams. Each participant was asked to draft 2-3 sticky notes with thoughts for each quadrant, according to the following questions:

- **Strengths:** What are the most critical strengths of FHD (i.e., those upon which we will draw in times of great challenge)?
• Weaknesses: What are the weakest links in the organization (i.e., the places most likely to break down when under stress)?
• What opportunities are noteworthy enough to warrant a game changing approach?
• What single threat is so great that it must be mitigated?

Responses generated from the group, are reflected below.

| Strengths, Weaknesses, Opportunities, and Threats (SWOT) Assessment Results |
|-------------------------------------------------|-------------------------------------------------|
| **Strengths** | **Weaknesses** |
| • Facility | • Communication |
| o Professional and easily accessible facility | o About changes in policies |
| • Financial Stability | o Between administration and staff |
| • Respected by state agencies with oversight | o Follow up |
| • Positive response partners | o Lack of time/resources to always provide thorough response/quality work, internally |
| • Awareness | o Too much to do |
| • Experienced and professional staff, who are: | • Understaffed-Overlap of staff (e.g., who serve on multiple committees) |
| o Efficient | • Policies-Lack of policies (or the response that, “we have always done things this way”) |
| o Small and adaptable-nimble | • Staff retention-Staffing changes in the future due to retirements |
| o Opportunities are available for professional growth and leadership | |
| o Longevity of staff | |
| o Loyal | |
| o Experienced | |
| o Cross training among staff who are able to fill-in for one another | |
| • Staff’s willingness to respond/help | |
| • Staff’s respect and support of one another | |
| **Opportunities** | **Threats** |
| • Consider offering more services similar to those provided by larger metropolitan health departments, such as air quality, radon, lead, and vector control | • Funding |
| • Research and grant opportunities for new/diversified funding | o Changes |
| • Interns-To develop the future public health workforce by offering hands on experience | o Unfunded mandates |
| • Establishing more of a community presence, by: | o Loss/potential loss of services |
| o Tapping into existing taskforce | • Lack of jobs- local economy |
| o Building relationships with partners, public relations, physicians and hospitals | • Lack of demand for services |
| o We could add a questions to the client survey to capture/assess community awareness, such as, “Are you aware of FDH services?” | o Due to competition (e.g., flu shots available at CVS, Walgreens, etc.) and managed care |
| | o Overall caseloads down (e.g., WIC caseload down statewide) |
| | • Communication |
| | o Food Program requirements changing |
| | o Lack of awareness (EH overall and within food program) and immunization services |
| | o Anti-government sentiment |
| | o Perceptions of health department |
| | o Offering a language line, low literacy materials |
Development of Strategic Priorities, Goals, and Objectives

The results of the environmental scan were discussed to identify and prioritize a list of strategic priorities based on areas which could have the most impact on improving service delivery and operations, and areas in which FDH could feasibly implement change. During the February 15, 2017 session, staff and Board of Health members rated high level discussion areas to form strategic priorities for 2017-2020. The strategic priorities identified, are reflected based on a dot voting method used and reflected in the word cloud below.

Identified strategic priorities by dot votes, as follows:
- Awareness and perception in community (18 votes)
  - Provide education about the availability of services
- Employee recognition and retention (16 votes)
  - Provide training (job specific and leadership)
  - Succession planning and transitioning due to aging workforce
  - Establish more concrete (SMART) personal goals for performance
- Funding (13 votes)
- Policies/protocols (12 votes)
- Technology (8 votes)
  - Expand use of technology for current processes, such as, monitoring surveillance, surveying, billing, etc
  - Expand use of technology to new platforms for marketing (e.g., social media, texting reminders about flu clinics)
- Establish more partnerships, especially with the media and partners to establish referral mechanisms and more communication (8 votes)
- Expanding services (3 votes)
- Address competition (e.g., flu shots provided through CVS, Walgreens now) (1 vote)
- Move meetings so more community members can attend (Board member suggestion)
- Accessibility (1 vote)
The top four areas identified included: 1) Employee recognition and retention, 2) Awareness and perception in the community, 3) Policies/protocols, and 4) Funding. While Funding received 18 votes, discussion reflected that funding was largely dependent on state and national sources, which were to a great deal, outside of the control of FDH. Instead, FDH chose to focus on three strategic priorities:

1) Employee recognition and retention,
2) Awareness and perception in the community,
3) Policies/protocols

Strategic goals and objectives, tied to each of the three strategic priorities, were developed. In addition, FDH formed strategies, or actions FDH would take over the next three years (by 2020) to accomplish each goal. Teams with members were assigned to implement each of the strategies and monitor completion of each goal and objective. The strategic planning progress will be recorded in the Strategic Priorities, Goals, and Objectives table (see Appendix C). FDH also compared these goals with the 2017 Strategic Plan, which included the following ten strategic issues:

**Community strategic issues**

- Improve the Public Health System in Fairfield County through collaboration with community partners.
- Address health issues identified within our community.
- Increase awareness of health department’s services and activities.
- Strive to meet stakeholder expectations in programming.
- Explore external funding opportunities.

**Organizational strategic issues**

- Maintain current financial stability while planning for future viability through strategic decision-making.
- Strive to maintain a workforce that is aware and engaged in Continuous Quality Improvement on a professional level.
- Increase efficiency and performance utilizing Continuous Quality Improvement principles.
- Prepare health department for Accreditation.
- Maintain proficiency in new technology and programming to increase efficiency and meet increasing demands

**Consideration of key support functions**

FDH considered key support functions necessary to build a strong infrastructure which would be adaptable to the changing needs of County residents, while considering potential political, funding, and legislative changes. The three strategic priorities identified, are critical areas in which FDH can feasibly make improvements to operations which will improve efficiency and effectiveness across the entire health department. Specific aspects in which each priority will support key functions of the health department include:

1. Increasing awareness of public health services in the community through expanded use of social media, new signage, and attendance during health fairs will help to build trust and relationships among community members and partners. FDH considered that, through its social media staff, FDH
has been able to reach more clients to share about the important functions public health provided in Fairfield County.

2. Recruiting and retaining a highly effective workforce while continuing implementation of the Workforce Development Plan, are critical to FDH operations. While FDH has effectively retained staff, succession planning and mentoring new employees will be essential in order to transfer knowledge and support the future public health workforce.

3. Updating of all policies and procedures while providing training on policies and procedures and further organization of the shared drive, while help to support all FDH staff across the agency to understand shared responsibilities and operations.

Linkages with the CHIP and QI Plan

Alignment between the FDH Strategic Plan and CHACHIP

FDH is committed to advancing the health of the residents of Fairfield County by addressing health issues identified and improvement strategies underway through the Community Health Assessment & Improvement Plan (CHACHIP) finalized January 1, 2017. Fairfield County, in collaboration with many partners developed the CHACHIP by using the National Association of County & City Health Officials (NACCHO) community wide strategic planning framework, or Mobilizing for Action through Planning & Partnerships (MAPP) process (see Appendix C, CHIP Executive Summary, for an overview of the process and priority areas). Through the MAPP process, as outlined in the CHACHIP, FDH and its partners identified three priorities for the next three years:

1. Adult, Youth and Child Mental Health
2. Adult and Youth Substance Abuse
3. Adult, Youth, and Child Obesity

Alignment between state and national priorities

Ohio State Health Improvement Plan

Fairfield County priorities very closely mirror the following 2015-2016 State Health Improvement Plan (SHIP) Addendum priorities:

- Priority 5: Implementing integrated mental and physical health care models to improve public health
- Priority 4: Promote public awareness, policy, programs and data that demonstrate that injury and violence are preventable
- Priority 2: Prevent and reduce the burden of chronic disease for all Ohioans

To align with and support Priority 5 (Integration of Mental and Physical Health Care Models), Fairfield County will expand evidence-based programs and counseling services targeting youth. Furthermore, Fairfield County will implement mental health screening tools. To align with and support Priority 4 (Injury and Violence Prevention [specific to substance abuse]), Fairfield County will increase the number of health care providers screening for alcohol and drug abuse. To align with and support Priority 2 (Chronic Disease), Fairfield County will increase education of healthy eating for youth.

U.S. Department of Health and Human Services National Prevention Strategies

The Fairfield County Community Health Improvement Plan also aligns with four of the National...
Prevention Strategies for the U.S. population: healthy eating, active living, mental and emotional well-being and preventing drug abuse and excessive alcohol use.

Healthy People 2020
Fairfield County’s priorities also fit specific Healthy People 2020 goals. For example:
• Mental Health and Mental Disorders (MHMD)-2: Reduce suicide attempts by adolescents
• Substance Abuse (SA)-2: Increase the proportion of adolescents never using substances
• Nutrition and Weight Status(NWS)-8: Increase the proportion of adults who are at a healthy weight
There are 12 other mental health objectives, 20 other substance abuse objectives, and 21 other nutrition and weight status objectives that support the work of the Fairfield County CHIP. These objectives can be found in each individual section.

Alignment between the FDH Strategic Plan, Performance Management and Quality Improvement Plan
FDH has developed an integrated performance management system (see FDH’s Culture of Quality Pyramid diagram below).

As reflected in the pyramid, the Fairfield County CHACHIP establishes health priorities and strategies to improve health at the County level. FDH’s strategic plan is informed by the CHACHIP priorities, but also includes strategic goals and objectives specific to the health department. FDH recognizes that the department’s goals and strategic priorities may lead to quality improvement projects, which must be
supported by competent staff. FDH also uses its performance management dashboard, customer satisfaction surveys, and the accreditation process to monitor performance, which inform the QI and Workforce Development Plan. Both the implementation of performance management workplans and QI projects are generated through FDH’s foundational work to provide programs and public health services in the community. The pyramid also reflects the timeframes for reporting and the teams responsible, although FDH regularly engages all staff at each level of the pyramid.
Appendices

The following is a list of items contained in the Appendices Section of this plan. It is understood that this is a living document and content may change throughout the plan period based on periodic reviews and updates. A log of reviews, updates and changes will be maintained and is located immediately following the cover page.

Appendix A: 10 Essential Services

Appendix B: Board of Health and Health Department Staff

Appendix C: Strategic Priorities, Goals & Objectives

Appendix D: CHIP Executive Summary

Appendix E: Client Survey Analysis

Appendix F: Employee Survey Analysis
Appendix A: The 10 Essential Public Health Services

1. Monitor health status to identify and solve 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 and action 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 competent public 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.

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## Appendix B: Board of Health and Health Department Staff

**Board of Health**
- Tina Childers
- Charley Engen
- Steven Kapentansky, MD
- Brian Oliver*
- David Petty*

**Health Commissioner/Medical Director**
- Dr. Mark Aebi

**Administration**
- Larry Hanna
- Kathie Whitlock
- Administrative Support
- Rachél Martindale
- Laura Schlabach

**Records Management**
- Sheri Ledgett

**Social Media**
- Laura Schlabach

**Fiscal**
- Jamie Ehorn
- Kelly Donley

**Vital Statistics**
- Pauletta Krieger
- Cindy Sharpe

**Environmental**
- Kelly Spindler
- Brandon Atwood
- Kevin Barlow
- Deb Kilbarger
- Dennis Oliver
- David Plummer
- Cindy Sharpe
- Madison Swackhammer
- Jen Valentine

**Nursing**
- Gwen Shafer
- Pat Garrett
- Tiffany Nash
- Diana Stover

**Public Health Emergency Preparedness**
- Merrilee Taylor

**WIC**
- Mary Smith
- Amy Gabriel
- Tiffany Gutridge
- Cheryl Hopkins
- Hannah Rarick
- Lucinda Robinson
- Deb Smith
- Stacy Hughes

*Denotes Board of Health members in attendance during the Strategic Planning Session.*
### Appendix C: Strategic Priorities, Goals, and Objectives

#### Strategic Priority 1: Awareness

**Goal 1: Create and implement a marketing plan**

<table>
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<th>Strategies/activities</th>
<th>Team members responsible</th>
<th>Timeframe</th>
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<td>2) Engage with residents and partners through expanded use of social media and dialogues to establish a presence and relationships</td>
<td>Develop new environmental health signage (e.g., stickers to demark inspected facilities or signs for new homes inspected)</td>
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<td></td>
<td>Attend health fairs and establish a booth at the County fair</td>
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<td></td>
<td>Distribute breast feeding friendly stickers</td>
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<td></td>
<td>Target health promotion/education activities within priority areas, such as Violet Township and around Canal Road.</td>
<td>Lucinda (social media), Hanna, Kevin, Diane, Sherri, Jamie. This workgroup will report to the Leadership Team.</td>
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<td>3) Increase awareness with community partners and governmental agencies</td>
<td>Conduct meetings with trustees</td>
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<td></td>
<td>Establish a referral list of services available for use among partners to improve access to care</td>
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<td>4) Actively contribute towards the implementation of the CHIP</td>
<td>Implement WIC and childcare initiatives</td>
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<td></td>
<td>Participate on the opiate taskforce</td>
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<td></td>
<td>Assess and update the Workforce Development Plan to ensure staff are trained in competencies to address community health issues</td>
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</table>
### Strategic Priority 2: Workforce Development

**Goal 2: To hire and retain, skilled and knowledgeable employees.**

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Strategies/activities</th>
<th>Team members responsible</th>
<th>Timeframe</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recruit and Retain skilled and knowledgeable staff</td>
<td>Precept students</td>
<td>Pat, Amy, Kathie, Kelly D., and Dave</td>
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<td></td>
<td>Establish a mentorship program for new hires</td>
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<td>Provide trainings to support staff development in leadership and job specific skills</td>
<td>Review and update the Workforce Development Plan</td>
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<td></td>
<td>Continue to implement the Workforce Development Plan with associated strategies and training schedules.</td>
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<td>Provide recognition for staff</td>
<td>Establish and implement an employee recognition committee and program (the program might include sending cards/letters to employees going through difficult times).</td>
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<tr>
<td>Objectives</td>
<td>Strategies/activities</td>
<td>Team members responsible</td>
<td>Timeframe</td>
<td>Progress</td>
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<tr>
<td>Establish a Policy Review Committee charged with evaluating current policies and procedures and future development/refinement</td>
<td>Implement policy on policies Establish termination and volunteer policies</td>
<td>Tiffany G, Merilee, Kathie, Sherri, Tiffany N, Brandon</td>
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<tr>
<td>Evaluate current policies against best practices/other health departments (which might include establishing a list of which policies/procedures should be in place per PHAB, and per best practices, when policies are reviewed, by whom, and how).</td>
<td>Cross reference policy and procedure needs per PHAB</td>
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<td>Clarify policy and procedure organization on shared drive to ensure documents are easily accessible and retrievable among all staff</td>
<td>Organize and simplify policy and procedure storage on shared drive</td>
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</table>
Appendix D: CHIP Executive Summary

2017 - 2019

Fairfield County
Community Health Improvement Plan
Community Health Assessment & Improvement Plan

Executive Summary

In 2010, Live Well Fairfield County (LWFC) began conducting community health assessments (CHA) for the purpose of measuring and addressing health status. The most recent Fairfield County Community Health Assessment was cross-sectional in nature and included a written survey of adults, adolescents, and children within Fairfield County. The questions were modeled after the survey instruments used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System (BRFSS), Youth Risk Behavior Surveillance System (YRBSS) and the National Survey of Children’s Health (NSCH) developed by the Child and Adolescent Health Measurement Initiative. This has allowed Fairfield County to compare the data collected in their CHA to national, state and local health trends.

Fairfield County CHA also fulfills national mandated requirements for the hospitals in our county. 3590 Patient Protection and Affordable Care Act states that in order to maintain tax-exempt status, not-for-profit hospitals are required to conduct a community health needs assessment at least once every three years, and adopt an implementation strategy to meet the needs identified through the assessment.

From the beginning phases of the CHA, community leaders were actively engaged in the planning process and helped define the content, scope, and sequence of the project. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment.

The Fairfield County CHA has been utilized as a vital tool for creating the Fairfield County Community Health Improvement Plan (CHIP). The Public Health Accreditation Board (PHAB) defines a CHIP as a long-term, systematic effort to address health problems on the basis of the results of assessment activities and the community health improvement process. This plan is used by health and other governmental education and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources. A CHIP is critical for developing policies and defining actions to target efforts that promote health. It should define the vision for the health of the community inclusively and should be done in a timely way.

To facilitate the community health improvement process, Live Well Fairfield County invited key community leaders to participate in an organized process of strategic planning to improve the health of residents of the county. The National Association of City County Health Officer’s (NACCHO) strategic planning tool, Mobilizing for Action through Planning and Partnerships (MAPP), was used throughout this process.

The MAPP Framework includes six phases which are listed below:

- Organizing for success and partnership development
- Visioning
- Conducting the MAPP assessments
- Identifying strategic issues
- Formulating goals and strategies
- Taking action: planning, implementing, and evaluation
The MAPP process includes four assessments: Community Themes & Strengths, Forces of Change, the Local Public Health System Assessment and the Community Health Status Assessment. These four assessments were used by Live Well Fairfield County to prioritize specific health issues and population groups which are the foundation of this plan. The diagram below illustrates how each of the four assessments contributes to the MAPP process.

Strategies:

<table>
<thead>
<tr>
<th>Priority Health Issues for Fairfield County</th>
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<tr>
<td>1. Improve Adult, Youth, and Child Mental Health</td>
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<tr>
<td>2. Decrease Adult and Youth Substance Abuse</td>
</tr>
<tr>
<td>3. Decrease Adult, Youth and Child Obesity</td>
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</table>

Action Steps:

To work toward improving adult, youth, and child mental health, the following action steps are recommended:

1. Increase the number of primary care physicians screening for depression during office visits
2. Increase early identification of mental health needs among youth
3. Decrease barriers to treatment

To work toward decreasing adult and youth substance abuse, the following action steps are recommended:

1. Increase the number of health care providers screening for alcohol and drug abuse
2. Increase the number of incarcerated adults receiving substance abuse treatment prior to and after release
3. Expand evidence-based programs and counseling services targeting youth

To work toward decreasing adult, youth and child obesity, the following action steps are recommended:

1. Increase education of healthy eating for youth
2. Implement the Produce Prescription Program
3. Implement a healthier choices campaign in schools
4. Implement Safe Routes To School
5. Implement Ohio Healthy Program in child care centers
6. Increase healthy eating habits through fostering self-efficacy

To work toward addressing all three priority areas, the following trans-strategies are recommended:

1. Increase Public Transportation
Appendix E: Client Survey Analysis

What services did you receive today?
Answered: 199  Skipped: 0

- Environmental (food service)
- Birth/Death Certificate
- Administration (including)
- Nursing (Immunizations)
- WIC
- Other (please specify)

Courtesy of employees
Answered: 160  Skipped: 0

- Excellent
- Average
- Poor
Speed of response to request

Answered: 99  Skipped: 1

Excellent

Average

Poor

Showing 1 response
N/A
The gentleman we met with, David Plummer, was very nice and extremely helpful to us.

Madison Swackhammer has been very helpful and friendly on both visits. She is personable and passionate about what she does. Thank You!

Dave Plummer has done an excellent job. The problem had been going on for a long time! EPA had been out in 2014 & until it got to an EPA person in approximately 12/5/2015 with EPA—he contacted Dave (as he told me that this was a health department issue)(which no one realized) but when Dave was contacted, everything is “moving in the right direction & action has been taken. Dave is very professional & accurate. (Need more like Dave taken care of problems!)

Jennifer is always very pleasant and professional.

We were very pleased with Brandon. He’s a kind good young man.

Staff has always treated us very well.

All very nice people.

Maybe some toys in the lobby.

Very helpful.

I was well taken care of.

Great people to work with here!

I love everyone here!!

Never have I had a complaint. Staff is always kind and helpful.

Very quick service!

Everyone is very nice & helpful.

Everyone is always very nice & helpful.

Everyone was very helpful, Mary is super friendly and made everything very easy to understand.

Lucy was so nice! So comforting and the nutritionist was very sweet and educated. The girl at the front desk was nice and professional.

Things seem to be running a lot smoother with the new system. My visits are usually pretty fast. I’m in an out. Today is taking longer than normal, but other than the waiting and going back and forth from waiting room to back is a little bit of a pain.

Make sure to tell clients about not using all formula for the month in one shopping trip. For heaven sakes the doctor switches formula. You could at least have client bring back formula and switch it in for new.
Are the hours of operation (8:00 a.m. to 4:00 p.m. and closed for lunch from 11:30 a.m. to 12:00 p.m for lunch) convenient for you?

Answered: 100   Skipped: 0

- Yes
- No

Showing 12 responses
- I understand
- Thank you!
- Thank you!
- Need later than 4pm.
- Personally, I think coverage over lunch would be good because of my feeble mind wouldn’t remember that.
- I wish there was one day that had longer hours, I work 8-5 m-f. Or maybe 1 Saturday a month would be good. I find it can be hard to schedule, that’s the only problem I ever have with the WIC office.
- Stay open until 5pm.
- Only needed services for a few months, can’t tell if any problems! Great so far!
- Bring back books for something for children to do in waiting room. Toys etc.
- Speedy and helpful staff.
- Wonderful team working for all of us. Thank you
Appendix F: Employee Survey Analysis

How is the Recognition of Performance at the Fairfield Department of Health?

Answered: 23  Skipped: 0

- Poor
- Fair
- Good
- Excellent

**Showing 14 responses**

- I am not aware of any “Recognition of Performance” here at the health department. It might be a good motivator for employees, if it is done correctly.
- I feel that there is limited recognition of good job performance and that extra work taken on as a courtesy to my working group and division is not acknowledged or appreciated.
- The public doesn't have a long wait period for their services.
- Could better recognize staff achievements and performances.
- I selected “good” because employee recognition is given during General Staff meetings, and for those employees who complete 10, 15, 20, 25, 30 years of service they get to attend the county breakfast. Just a thought, maybe FDH have a coffee, breakfast snacks to recognize employees who have completed a year of service.
- I think that the board of health and administration were trying to recognize employees for a job well done. I believe that the agency could improve on individual recognitions for excellent work performance. Job activities that are directly link to job descriptions need more recognition than employees that have spent time completing task that are not directed at work related activities.
- Only told verbally, but nothing that you can feel really good about for all the hard work we do.
- We really don't have a recognition program for employees.
- I know people are recognized by name at Board & staff meetings, but some times that seems a little “flat”. You have “do-ers” that will perform without recognition, but there needs to be something to motivate the “sit-back-and-waiters”.
- Directors are good about acknowledging staff that perform well.
- Inconsistent
- We don't really have any type of recognition system set up. Employees only get recognition if their supervisor verbalizes it to them
- It seems like the only time any recognition is given is when something major happens like when the outbreak occurred.
- My supervisor is fair and supportive.
Since we only close for a half hour at lunchtime, it might be helpful for the public if we stayed open and did not close for that thirty minutes. It would mean staggering lunches. It is helpful to the public the nursing has late immunization clinics twice a month.

I prefer the current hours of operation.

Lunch is short.

Our hours of operation are fair, but could be adjusted to fit our customers’ needs. The adjustments should be made based on the division and the customer’s needs within that division.

8:00am-4:30pm with a 30 min lunch. This work schedule would be more in-line with other agencies and also have the benefit of increase staff pay to other departments in the area.

It's okay, miss the hour lunch. You always feel you have to eat fast and you don't get to go out much to enjoy not being confined.

I feel like I need more time to get my job(s) done, but I do appreciate the hours.

The department should not shut down for lunch. We should be able to stagger lunches in order to stay open at lunch. A lot of people run their errands during their lunch hour - we need to be open to serve them.
My direct supervisor does a good job. She is accommodating, while expecting the work to be done. She takes input from her employees. She assists as needed. Management above her does not always seem open to input and does not want to address the increased work load with no added personnel. It can feel like being set up to fail.

I feel that the immediate supervision I receive is adequate for my job duties. I feel that my supervisor is active in assisting me with day-to-day issues and questions. I feel that I am supported in being independent and trusted in my job function.

Need information passed on by supervisors instead of hearing by word of mouth.

I think more collaboration is needed between supervisors, directors, administrator and Health Commissioner. I would recommend having again (monthly or quarterly) leadership meetings which include all titles listed above.

Some department heads are too busy to supervise their staff. Most staff get away with excluding themselves from task because the heads are to busy to notice or care. My supervisor is fair and always offering to help.

I get timely feedback and my Director is always available for questions and feedback.

I wish we could be more pro-active...if an issue is identified, deal with it & fix it. We tend to "wait & see", "maybe no one will notice". Those bringing concerns & issues forward are made to feel like "pot-stirrers" or just over-reacting. Staff is sometimes left to make things work, because management has minimalized the issue.

Directors are highly skilled, knowledgeable and experienced.

Some areas better than others
In order to attract quality professionals, wages should be correlated with degrees /professions.
I am happy with the current wage/benefits.
Say that you were hired in at $8 an hour five yrs ago. Someone is than hired now for that same position, but @ $10 an hour. Shouldn’t that 5 yr employee be given a $2 raise?
Raises and maintaining employee health insurance at current levels is greatly appreciated. Would like if we were a 40 hour a week employer.
Fair, considering that we hear how everything is being cut to save money. We are lucky to have a job. With that being said, some of us work very hard for what we are paid. Maybe with all the cuts we will be in a better place to offer more wages.
I feel the wages could be higher to be competitive. I do like the benefits.
But I’m not sure they are good enough to attract many new employees. Consider a person starting out; making a house payment/rent, car payment, & paying back student loans. Not much left over for other bills.
Doing the best it can under the current budget situation
Seem to be competitive for the area
With the cost of living going up and not getting a raise makes it kind of difficult. I’ve been with the company for a while now and have made just over a dollar more than from when I started.
There is internal training, but attending outside trainings that cost money seems to be discouraged due to financial considerations. This seems to be a way that we miss bringing fresh, updated ideas into our daily work. More and more training is being required of everyone, but it is not factored into our percentages for each program in which we have allotted amounts of time for budget purposes. There is no way to make up that time. Also, it would help to know on a yearly basis what is expected in the way of trainings. That way we can plan ahead. I know there is a training tracker available for us to view, but it does not let you know how often certain trainings are required.

I feel that the department would benefit from having more frequent interactive training exercises with staff (table top exercise, etc.). I also feel that trainings regarding response to specific illnesses should be provided.

Excellent for me personally.

It's a lot of time for a new employee

I feel that the new employee training could be better.

I think that with the limited staff the department is functioning with that staff have the opportunity to increase professional awareness and skills. More needs to be done to allow staff the opportunity to improve professional abilities. This may require hiring additional professional staff.

We have a lot of trainings.

This is improving

We don't have good procedures to learn from & it seems those procedures change depending on the situation. A good trainer needs to be a qualification we look for in new management positions.

It's improving
Overall, there is cooperation. Sometimes there is tension between departments, such as when one department has to depend on the assistance of another department. The overlap of duties between departments sometimes causes problems. For some groups, accountability/responsibility is not there, as far as completing their assigned duties. Upper management is not engaged with how much time it takes to implement grant programs and they expect them to be done by piling them on top of other duties.

I feel that teamwork is okay within my working group. Often the same people are held responsible for chipping in effort while others never contribute. Acknowledgement of these efforts would be appreciated.

I feel we all work together to get the job completed.

Divisional team work is good. I think more needs to be done to build trust and relationships with all divisions of the department. The Nursing Program, WIC Program, Administration and Environmental Program need to work together to facilitate the goals and objectives of the agency. By the way what are the goal and objectives of the agency? since I have started I have not been made aware of what those actually are for the FDH.

I would rate fair, if ALL staff would participate in helping others this rating would be higher. Some staff in here do not participate or volunteer time to help others at all. Those individuals are not told to help they are asked and if they don't want to they don't have to. Other staff get no choice, you are made to do it. Sadly, those are the ones that don't mind helping or volunteering but its sad to see the same ones step up to help the department.

I believe there is teamwork, but that it is within divisions. I do not feel that the divisions always cooperate together. I do have the ability to input my ideas, but since my ideas are more progressive, I do not feel that they are always received or considered.

We need more people to participate in the committee's. It is always the same people.

An idea is accepted if you have it all figured out & are willing to do all the work. An idea alone will not be fostered & worked out by management. It just floats out there until it dies. I can't approach just any employee and expect them to work with me, but I know the few who are willing to help out. There are some I am afraid to even approach.

The spirit of teamwork has improved over the last several years.

Teamwork/Cooperation between divisions on common goals is improving. Staff input of ideas is improving with the implementation of CQI projects.

We have teams that work on certain projects, but I feel the team members are always the same people. We need to spread the love a little bit.

I feel our team work within our agency is great. Overall with all the agencies, we could use a little more team work. But again it doesn't seem like we all get together and work as a team unless there is something major going on, like the outbreak. It would be nice to get together maybe every other month to do some team work goals. Not necessarily training things.

I try to be fair and work with everyone. Sometimes people are just so busy they may seem a little out of sorts. It is usually just the stress of the job and we do have a very good working environment.
How would you rate the communication within your organization with Administration?

Answered: 23  Skipped: 0

- Poor
- Fair
- Good
- Excellent

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Showing 8 responses

- We get frequent emails and departments have meetings to discuss and update everyone on what is happening. Sometimes we hear about things that affect us “through the grapevine” instead of in a more formal way.
- When issues arise while conducting my job duties I don't feel that there is effective communication with administration. I feel that when an individual of the public complains I am questioned as if I am guilty. More support from administration would be greatly appreciated in such instances.
- Division meetings are very productive and effective. However, department staff meetings, when they are held are not as beneficial.
- This needs to be across the table for all staff.
- Overall, I think communication is good. Sometimes communication between divisions is lacking.
- People don't talk or brief their co-workers. Emails & voicemails aren't checked or read. If they are, it is difficult to get a response back. To ask a simple question, I feel rushed & like I'm a huge inconvenience. It embarrasses me the way some of us talk to each other and/or to the public. People talk down to me.
- General staff input into decision making is improving. Sometimes there is a disconnect between Administration and general staff in implementing programming. Communication and direction should be consistent across all parties involved.
- There are times staff doesn't know about events that are transpiring within the department. Example would be botulism.....employees went home with NO knowledge that anything was going on and were then called in to assist in an investigation. We were all in the same building and had NO idea anything was transpiring.
What do you feel Fairfield Department of Health is doing "well", as an employer?

Answered: 17  
Skipped: 6

- The health department is working to get everyone through the accreditation process.
- Good pay, Good benefits, Good hours
- I personally feel like the Health Department is concerned about the welfare of its employees.
- Yes
- Organizing and planning trainings
- I think FDH is very good at making new employees feel welcome. I also think we really put our customers-the public-interests first.
- The Fairfield Department of Health maintains a great work environment and administration is always trying to meet the needs and wants of the employees.
- It has a good workforce, who can pull together and work as a team.
- There are many things the department is doing well. The facilities are nice and employees are professional.
- Putting the employees first with wage increases, benefits, staff meetings that keep all employees up to speed on what is happening within the department.
- Continuing to work for FDH to become accredited.
- Since FDH is small, there is more unity than large organizations where you do not know everyone. I feel that because we are small, there is more respect between employees.
- Our facility is professional looking & well kept.
- The physical working environment has drastically improved along with wages.
- Trying to balance employee needs with budget constraints
- We are making a good effort towards accreditation
- Our safety
It is good to have holiday and retirement parties. As pertains to the holiday party, it takes the people involved in planning away from their usual duties. That can be expected to a certain degree, but from the outside looking in, it seems to be excessive.

I do not feel that events such as the Christmas party should be so forced on employees. I don't feel it is necessary to send an email stating that volunteers are requested for the committee and then "threaten" that if volunteers do not come forward people will be assigned to the committee. I personally do not have the time to partake in the planning and often am busy around the holiday.

Too much time is spent on decorating! The focus should be on getting to know people from other departments.

I think we should consider doing catering for our gatherings and parties. It would be much easier for employees to pitch in 5-10 dollars than to carry in an item and attempt to keep it hot or cold half of the day.

For those who think otherwise, it's what effort that an employee makes to contribute makes it enjoyable.

Would like to see more off site planning and development meetings. Get all the staff at a location that is conducive to meeting is important. I think some of the best training and team building opportunities occurred when this was done.

Great, It's always nice to know we have that to look forward to so you can interact with other staff that you don't always see.

Besides the holiday party, I do not know of any gatherings.

People waste far too much time on these events. They are nice, but I feel guilty about the time spent-planning, set up, and decorate the event, clean up. Could it be simplified with light refreshments (cookies) at the staff meeting that month? Pick up cookies, napkins, everyone brings their own coffee. Attendance at meetings might improve too.:)

Well planned and provides that interaction with all staff. Some departments never even see certain groups of staff, or know their names.

It's always nice to have time to mingle with your co-workers. It helps build relationships.

It would be nice to have more get togethers/gatherings as a group to get to know everyone. I think it would help us work better as a team if we knew the strengths of the employees. So when something does come up we would know who to pair up to get the better results. We used to have a monthly email letting us know when everyone’s birthday was for that month and their work anniversary. That would be a great thing to see again. We need to have something to celebrate more.
Overall, How would you rate the Fairfield Department of Health as an employer, and what do you feel would "improve" the Fairfield Department of Health as an employer?

Answered: 23  Skipped: 0

- Working here overall is good. I am allowed the flexibility I need to get my job done. The people here are great. The workload is increasing, which is stressful. It seems more duties are added, but none are taken away. This is something for management to address.
- All recommendations I have can be found within previous question explanations.
- Better lighting and cooler temperatures could help to improve productivity.
- Higher pay
- FDH has great team members who work well together so keeping that focus in mind as FDH moves forward would be beneficial.
- The department’s public image needs work for multiple reason. This greatly impacts day to day operations. The public does not see the Fairfield Department of Health as a leading force in Fairfield County. We all have a responsibility to improve relationships with county partners and the public. I think the department future depends on it.
- Good, FDH staff working together to make the department shine. We all are the key holder to making the department a great place to work to continue to serve our public.
- First of all, I am very happy to be here! I feel to improve, there should be more cooperation between divisions, considering the workload for the workforce, and being more progressive instead of "sticking with the old ways".
- Don’t write rules/policies for everyone when you are trying to rein in just a few people. Talk to/discipline those people. It really can empower everyone else. If someone takes the time to approach you with an issue, don’t minimize it. It must be important to them or they wouldn’t have taken the time to approach you. When you hear someone speaking with an attitude, pull them aside and point it out to them. Maybe we don’t realize how we sound to others. Engage the people flying under the radar. They can pull their own weight, they can help out a co-worker. Working with the public is hard. This office & our FDH family should be our safe-haven. It should never add more stress to our work day.
- Need a more equitable system to assign "other duties" - like PHAB. Continue increasing staff input in decision making. Improve communication so everyone is on the same page and clear on expectations.
- Getting more staff involvement in projects...don’t always choose the same people for committees. Keep communication flowing among divisions...remember we all work for the Health Department so the public assumes that every employee knows what is going on regardless of the division you work for.
- Increased pay would be nice. Get to know employees better.
- It would be nice to have more help but I also know it is the sign of the times more work less people. Too much government!