

# Flathead City-County Health Department Strategic Plan

FY 2018 - FY 2020

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## **INTRODUCTION**

The *Flathead City-County Health Department Strategic Plan: FY 2018-FY 2020* (Strategic Plan) serves as a tool to help the Flathead City-County Health Department promote a healthier Flathead County by setting the foundation to drive improvement. The Strategic Plan identifies priority health issues and serves as a road map for the Health Department for the next three years. The strategic planning process utilized the Health Department mission and vision, the Flathead County community health improvement priorities, the Montana state health improvement priorities, and the input of the Board of Health, leadership and staff.

The strategic priority areas identified are:

- Organizational Excellence
- Emerging Technology
- Mental Health
- Access to Services
- Immunizations

## BACKGROUND

The Flathead City-County Health Department provides quality public health services to ensure the conditions for a health community within Flathead County and the catchment areas of Lake, Lincoln, Sanders, and Glacier Counties. According to the 2016 U.S. Census estimate, Flathead County has a total population of 98,082 making it the fourth largest county in Montana and one of the fastest growing counties in the state, with a population increase of 22.1% from 2000 to 2010. Kalispell is the county seat and primary population center in the County. There are two other incorporated cities in Flathead County: Columbia Falls and Whitefish, and 10 unincorporated communities.

The Health Department provides public health services in four divisions. These divisions include Community Health Services, Environmental Health Services, Family Planning and HIV Services, and Health Promotion. The Health Department also oversees the Flathead County Animal Shelter and Flathead County Home Health and has a co-applicant agreement with the Flathead Community Health Center. Each of the divisions within the Health Department provides reduced cost, culturally sensitive, and professional services to meet the diverse needs of the community.

#### **COMMUNITY HEALTH**

Community Health Services provides public health nursing, social work and nutrition services. Education and health information is provided along with health screenings, prevention, referrals, communicable disease investigation and surveillance, immunizations, maternal and child health services, and Women Infants and Children (WIC) services. The Maternal Child Health program serves pregnant women, pregnant and parenting teens and children through individual and community based programs. Women, Infants, and Children (WIC) staff provide nutritional support to pregnant and breastfeeding women and to children birth to five years of age.

#### **FAMILY PLANNING AND HIV SERVICES**

Family Planning and HIV Services offers reproductive healthcare; pregnancy testing, options counseling, and referrals; contraceptive supplies; sexually transmitted disease surveillance and education all on a sliding fee scale.

#### **HEALTH PROMOTION**

Health Promotion provides affordable bike and all sport helmets, car seat inspections, and affordable car seat options. Tobacco prevention and cessation assistance is available for clients, all high schools, many businesses, and through a phone-based cessation hotline. A program for income eligible women offers free breast, and cervical cancer screenings. The Public Health Emergency Preparedness program for Flathead County based out of Health Promotion.

#### **ENVIRONMENTAL HEALTH SERVICES**

Environmental Health Services consists of a sewage and septic program, air quality monitoring program, mosquito control program, and food and consumer safety program, which includes restaurant, public accommodation, and spa and pool inspections. Radon testing and education is also available in Environmental Health.

## **MISSION, VISION AND OPERATING PRINCIPLES**

#### **MISSION**

Providing quality public health services to ensure the conditions for a health community.

#### VISION

Healthy People in a Healthy Community

#### **OPERATING PRINCIPLES**

The Flathead City-County Health Department is committed to the highest standards in public health service. Not only is all the staff of the Health Department expected to understand and abide by all County policies, but has a *collective responsibility* to adhere to the following operating principles.

Every task and position within the Health Department is important and part of a bigger mission. As staff of the Health Department, it is expected that you acquire and sustain a general *knowledge* of public health principles and Health Department specific programming. Each division within the Health Department contains subject matter experts who should be able to answer questions about a specific discipline. Staff should never answer questions outside of their scope of practice, but should refer to other appropriate experts and provide resources as needed. Additionally, Health Department staff is expected to be familiar with services offered by outside community agencies and refer appropriately.

The Health Department speaks with *one voice*. Public information is disseminated as a formal position of the Health Department and must go through designated Public Information Officers and approved through an established process.

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All staff has a responsibility to protect the Health Department **brand**. When you wear the Health Department logo, remember you represent the Health Department; attire with the Health Department logo should not be worn where it would compromise the reputation of the Health Department. Further, be conscientious of use of social media. Remember the Health Insurance Portability and Accountability Act (HIPAA Healthcare Privacy) applies to social media sites.

Be respectful of other staff and clients. *Respect* county time and county property, including your workspace and county vehicles.

Each division serves the community in different ways, but all services need to be provided in a manner consistent with the Health Department's *dedication* to public health. Further, each division has its own unique prioritization of services, but the number one priority is to attend to the person in front of you. All interactions with clients should be conducted in a courteous and respectful manner. Staff is expected to provide services without judgment. Always ask if help is needed and if they need directions, do not point, show. Acknowledge clients as they walk in the door. Listen to the clients' needs, hold them accountable for their actions, and keep appropriate boundaries.

The Health Department is fortunate to employ a diverse workforce with extensive knowledge. When we work together it enhances our public health service delivery. Positive communication patterns trust in staff, delegation with clear responsibility, and understanding unique learning styles are all integral pieces of working together. Take *pride* in utilizing available resources. Know your limitations and do not be afraid to ask for help. We are not here to build program silos; working collaboratively with coworkers is essential in order to provide optimum public health service delivery.

Live a *lifestyle* that supports public health priorities.

## STRATEGIC PLANNING PARTICIPANTS

#### **Flathead City-County Board of Health:**

- David Myerowitz, MD
- William Burg, CPA
- Pam Holmquist, County Commissioner
- Michael Nicosia, PhD

- Duane Larson, City Representative
- Aaron McConkey, PE
- Ronalee Skees
- Wayne Miller, MD

### Flathead City-County Health Department Strategic Planning Leaders:

- Joseph Russell, Health Officer (Retired June 2017)
- Hillary Hanson, Health Officer (July 1, 2017 – Present)

#### • Heather Murray, Community Health Nurse and Accreditation Coordinator

### Flathead City-County Health Department Management Team:

• Kate Cassidy, Environmental Health Coordinator July 2017

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- Jeannine Lund, WIC Coordinator
- Holly Jordt, Maternal and Child Health Coordinator
- Lisa Dennison, Immunization and Communicable Disease Coordinator

## **STRATEGIC PLANNING PROCESS**

The process for development is outlined in Table 1.

### **Table 1: Strategic Planning Meetings**

PURPOSE	MEETING DATE	WHO ATTENDED
Past Strategic Plan Review and Process Planning	October 26, 2016	Planning Leaders
Compilation of documentation for Board review including: summary of past Strategic Plan, organizational chart, and community health improvement plan strategies)	November 2016 – January 2017	Planning Leaders
All documentation provided to Board of Health via email	January 13, 2017	Board of Health
Board of Health Strategic Planning Retreat (Review of mission, vision, operation principles, community health improvement priorities, state health improvement priorities, organizational chart and past Strategic Plan)	January 19, 2017	Board of Health and Planning Leaders
Strategic Plan Development	February – June, 2017	Planning Leaders/ Management Team
Strategic Plan Presented to Board of Health	July 20, 2017	Board of Health, Planning Leaders, Members of Management Team

# **BOARD OF HEALTH INVOLVEMENT**

The Board of Health members attended a strategic planning retreat. During this meeting, the Board of Health also received information on the Flathead Community Health Assessment, Flathead Community Health Improvement Plan, and the Montana State Health Improvement Plan (Big Sky. New Horizons. A Healthier Montana: A Plan to Improve the Health of Montanans). Information from this meeting was compiled by the Strategic Planning Leaders in the form of a Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis. Results of the SWOT analysis are provided below:

<ul> <li>STRENGTHS</li> <li>Coordination and collaboration between public health divisions</li> <li>Focus on the Health Department Operating Principles</li> <li>Public outreach by Health Department (teens, schools, providers)</li> <li>Customer service (nobody leaves the building without a service or a referral)</li> <li>Immunization (extended hours, clinics, appointments for regular immunizations)</li> <li>Financial stability</li> <li>Achievement of public health</li> </ul>	<ul> <li>WEAKNESSES</li> <li>Leadership training for management team</li> <li>New employee orientation to services</li> <li>Coordination with Flathead Community Health Center (many further opportunities to coordinate)</li> <li>Dropping participation numbers in WIC and Family Planning</li> <li>Ensuring Community Health Improvement Plan strategies are a priority</li> <li>Services centered in one location in Flathead County</li> </ul>
<ul> <li>accreditation</li> <li><b>OPPORTUNITIES</b></li> <li>Community referral system</li> <li>Increased partnerships with healthcare organizations in the community</li> <li>Public health accreditation (external funding, educational opportunities, etc.)</li> <li>Required use of evidence based models for many programs</li> <li>Flexibility in some funding to allow for opportunity to serve a variety of client needs</li> </ul>	<ul> <li>Keeping current with changing regulations</li> <li>THREATS</li> <li>Continued funding cuts at the state and national level</li> <li>Difficulties with coordination of care between agencies</li> <li>Increased competition for fewer funding sources</li> <li>Funding requirements that make collaboration across programs difficult</li> </ul>

## ALIGNMENT

During the strategic planning process the Flathead Community Health Assessment, Flathead Community Health Improvement Plan and the Montana State Health Improvement Plan (Big Sky. New Horizons. A Healthier Montana: A Plan to Improve the Health of Montanans) were referenced. The link to each plan is noted in the description of the objectives, where applicable.

## **MONITORING AND QUALITY IMPROVEMENT**

The Strategic Plan will be monitored as one component of the Flathead City-County Health Department Performance Management System (along with performance measures developed by each program). The Performance Management System and all related objectives will be monitored on a quarterly basis.

A core component of the Performance Management System is quality improvement. The Flathead City-County Health Department Quality Improvement plan will be utilized to guide the process of any quality improvement activities.

# **STRATEGIC PRIORITIES**

## **PRIORITY AREA: Organizational Excellence**

Flathead City-County Health Department strives for organizational excellence to ensure the provision of quality services that meet the needs of the community.

**GOAL:** Improve organizational excellence by continuing to meet national public health accreditation standards.

Organizational Excellence: Objective 1	Flathead City-County Health Department will maintain National Public Health Accreditation.
Link to State Health Improvement Plan	<i>Montana System Improvement Goal:</i> Accelerate the use of the national Public Health Accreditation Board's national standards for public health practice by state, local and tribal public health agencies.
Performance Metric	All six core public health plans will meet reaccreditation standards (community health assessment, community health improvement plan, strategic plan, quality improvement plan, emergency operations plan, and workforce development plan).
	In 2012 the Public Health Accreditation Board launched the first accreditation process aimed at health department's (state, local and tribal). The accreditation process is currently voluntary and is based around the 10 Essential Services of Public Health. Public health accreditation provides a framework for evaluating a health department's processes and services, outcomes, and progress towards specific goals and objectives. Accreditation provides an opportunity to advance quality and performance within a public health department.
Reasoning for Metric Choice	In November 2016, the Flathead City-County Health Department achieved accreditation and immediately moved onto the process of reaccreditation. The Reaccreditation Standards and Measures assess improvements and advancements made since initial accreditation. There are six core plans that will be required for submission during the reaccreditation process: community health assessment, community health improvement plan, strategic plan, quality improvement plan, emergency operations plan, and workforce development plan. Detailed requirements for these plans are included in the Reaccreditation Standards and Measures.
Target/Benchmark	FY 2018: 0 of 6 updated FY 2019: 2 of 6 updated FY 2020: 4 of 6 updated FY 2021: 6 of 6 updated

Source of Data and Data Explanation	Standards for these plans are determined by the Public Health Accreditation Board and are detailed in the Guide to National Public Health Department Reaccreditation Standards and Measures.
Frequency data will be analyzed	Semi-annually
Baseline Measurements	FY 2017: No plans have been updated to meet new standards.
Responsible Party	Accreditation Coordinator and Health Officer

Organizational Excellence: Objective 2	Flathead City-County Health Department will regularly seek feedback from customers and stakeholders.
Link to State Health Improvement Plan	<ul> <li>Montana System Improvement Goal:</li> <li>Promote the use of quality improvement methods to strengthen public health and health care services, programs, and processes.</li> <li>Build the public health and health care system's capacity to turn data into information for action.</li> </ul>
Performance Metric	Percent of Health Department divisions performing one customer/stakeholder satisfaction survey at least every other year.
Reasoning for Metric Choice	Customer focus is a key part of a performance improvement. To evaluate the effectiveness and efficiency of the work, it is essential to identify customers and stakeholders, both internal and external. There must also be a process to capture and analyze customer feedback in order to address the expectations of various public health customers. During public health accreditation, one of the weaknesses noted was that capturing and analyzing customer feedback was not routinely completed (and in some divisions, it had been multiple years since a survey had been completed). Making this a priority will improve our services and ensure we are meeting the needs of our community.
Target/Benchmark	FY 2018: 25% (1 of 4 divisions) FY 2019: 50% (2 of 4 divisions) FY 2020: 100% (4 of 4 divisions)
Source of Data and Data Explanation	The Health Department has four divisions that will be included in this metric: Community Health, Environmental Health and Health Promotion, and Family Planning. Each division that completes a survey will present their survey, results and improvement plan to the Performance Management Team.

Frequency data will be analyzed	Semi-annually
Baseline Measurements	FY 2017: 25% (Community Health Services – Immunization program provides an annual survey to customers)
Responsible Party	Program Coordinators/Supervisors

Organizational Excellence: Objective 3	All staff will participate in Quality Improvement activities on a regular basis.
Link to State Health Improvement Plan and Healthy People 2020	<ul> <li>Montana System Improvement Goal:</li> <li>Promote the use of quality improvement methods to strengthen public health and health care services, programs, and processes.</li> <li>Healthy People 2020:</li> <li>PHI-16 - Increase the proportion of Tribal, State, and local public health agencies that have implemented an agency-wide quality improvement process.</li> </ul>
Performance Metric	Percent of public health division staff that have participated in a quality improvement project.
Reasoning for Metric Choice	Performance management and quality improvement (QI) are the foundations of public health accreditation. We are working to create a culture of quality throughout the Health Department and make QI a part of the daily activities of doing business. While we have begun the process of developing an integrated QI process, we have not yet established QI as part of the culture. Our aim is to establish performance management and QI practices and processes in all facets of the Health Department's operations. By involving all staff in QI, performance metrics will gain context and staff will understand the QI process and benefits.
Target/Benchmark	FY 2018: 50% FY 2019: 75% FY 2020: 100%
Source of Data and Data Explanation	QI activity is documented and tracked through the Performance Management System. The list of all participating staff will be maintained as part of this documentation.
Frequency data will be analyzed	Annually
Baseline Measurements	35% as of FY 2017

<b>Responsible Party</b>	Program Coordinators/Supervisors	
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Organizational Excellence: Objective 4	Flathead City-County Health Department will provide cultural competency and health equity training to all staff.
Performance Metric	Percent of staff that have completed cultural competency and health equity training per three year Workforce Development Plan cycle.
Reasoning for Metric Choice	The National Institutes of Health describe culture as the combination of a body of knowledge, a body of belief and a body of behavior. Culture involves a number of elements, including personal identification, language, thoughts, communications, actions, customs, beliefs, values and institutions that are often specific to ethnic, racial, religious, geographic or social groups. It is important for the Health Department to understand how values, norms and traditions of the populations served affect how individuals perceive, think about, and make judgments about health, health behaviors, and public health services. Those values, norms, and traditions affect how populations interact with public health workers, how open they are to health information and health education, and how they can change health behaviors.
Target/Benchmark	100% of staff will participate in one cultural competency and one health equity training per three year Workforce Development Plan cycle (FY 2018 – FY 2020).
Source of Data and Data Explanation	Participation in all trainings is tracked as part of the Workforce Development Plan. Attendance records will be utilized to review the staff participation in trainings.
Frequency data will be analyzed	Annually
Baseline Measurements	No baseline Measure
Responsible Party	Accreditation Coordinator and Health Officer

## **PRIORITY AREA: Emerging Technology**

Flathead City-County Health Department strives to utilize emerging technology to ensure the delivery of high quality and efficient public health services.

Emerging Technology: Objective 1	Flathead City-County Health Department will participate in a community wide referral system.
Link to State Health Improvement Plan and Community	<i>Montana System Improvement Strategy:</i> Use available and emerging technologies to improve the delivery of clinical preventive services.
Health Improvement Plan	<i>Community Health Improvement Plan Strategy</i> Expand electronic management referral system.
Performance Metric	Percent of programs utilizing the community electronic management referral system.
Reasoning for Metric Choice	The Community Health Assessment has regularly identified that making appropriate connections to services in our community remains an issue. One barrier to making these connections is the referral process. Currently, each agency in the community determines their own referral process and follow-up procedures. This means some agencies only accept referrals via fax, other via the phone and still others via email. Determining the process for referrals can often be confusing and time consuming. One strategy identified in the Flathead County Community Health Improvement Plan to overcome this barrier is the creation of a community-wide electronic referral system. The Health Department can support this system by ensuring all relevant programs are utilizing the system. In the Health Department, there are 7 programs that are ideal for participation in the referral system: WIC, Dental, Car Seats, Home Visiting, Medical, Family Planning and Cancer Screening.
Target/Benchmark	FY 2018: 3 of 7 programs participating FY 2019: 6 of 7 programs participating FY 2020: 7 of 7 programs participating
Source of Data and Data Explanation	Program engagement will be tracked by the electronic referral system and a report can be run to determine the participation. A program will be considered a participant if they receive/provide at least 5 referrals per fiscal year.
Frequency data will be analyzed	Annually
Baseline Measurements	0% as of FY 2017 (The system has been in a pilot phase and is expected to launch community-wide September 2017.)

**GOAL:** Improve services offered by utilizing up to date technologies.

Responsible Party	Program Coordinators/Supervisors	
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Emerging	Flathead City-County Health Department Immunization Clinic will
Technology:	utilize electronic tablets for the delivery of services at all clinic
Objective 2	locations.
Link to State Health Improvement Plan	<i>Montana System Improvement Goal:</i> Use available and emerging technologies to improve the delivery of
	clinical preventive services (e.g., tracking prenatal care, use of recall/reminders for prenatal care).
Performance Metric	Percent of Immunization Clinic locations that utilize electronic tablets for delivery of services.
Reasoning for Metric Choice	eClinical Works now is fully functional through the use of electronic tablets. The utilization of electronic tablets would eliminate the use of paper tracking of patient immunizations for outlying clinics, improve the efficiency of services and, improve the speed at which billing could be completed. The Immunization Clinics that could be utilizing the electronic
	<ul> <li>tablets, for the purposes of this metric are:</li> <li>1. Primary location (1035 1<sup>st</sup> Ave West)</li> <li>2. Columbia Falls (1x/month)</li> <li>3. Whitefish (1x/month)</li> <li>4. Business influenza clinics</li> <li>5. Community influenza clinic</li> </ul>
Target/Benchmark	FY 2018: 1 of 5 (Primary Clinic) FY 2019: 3 of 5 (Primary Clinic, Columbia Falls, Whitefish) FY 2020: 5 of 5
Source of Data and Data Explanation	This data will be tracked in a Performance Management System spreadsheet. A clinic will be considered to have achieved this objective when at least 90% of the immunizations completed are tracked utilizing the electronic tablets.
Frequency data will be analyzed	Semi-annually
Baseline Measurements	Electronic tablets are being used sporadically by some staff and nothing being utilized at outlying clinics.
Responsible Party	Immunization and Communicable Disease Coordinator

### **PRIORITY AREA: Mental Health**

Flathead City-County Health Department strives to be an organization that realizes the impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff and others involved in the system.

**GOAL:** Be an organization that fully integrates knowledge about trauma into policies, procedures, and practices, and seeks to resist re-traumatization.

Trauma Informed Care: Objective 1	Flathead City-County Health Department will be a trauma informed organization.
Link to State Health Improvement Plan	Montana System Improvement Goal: Improve services to traumatized children using evidence-based practices in the health care and public health system.
Link to Community Health Improvement Plan	<i>Community Health Improvement Plan Strategy:</i> Educate the community on trauma informed care.
Performance Metric	Number of trauma informed care initiatives implemented at the Health Department.
Reasoning for Metric Choice	<ul> <li>Exposure to abuse, neglect, discrimination, violence, and other adverse experiences increase a person's lifelong potential for serious health problems and engaging in health-risk behaviors, and other subsequent research, health care policymakers and providers increasingly recognize that exposure to traumatic events, especially as children, heighten patients' health risks long afterward.</li> <li>The <i>Trauma Sensitive Organizational Self-Assessment</i> is a tool that organizations can use to examine the current policies and take specific steps to become trauma informed. The Self-Assessment examines the following areas: <ul> <li>Supporting Employee Development</li> <li>Creating a Safe and Supportive Environment</li> <li>Adapting Policies</li> <li>Assessing and Planning Services</li> <li>Involving Customers</li> </ul> </li> </ul>
Target/Benchmark	<ul><li>FY 2018: One trauma informed care initiative will be implemented.</li><li>FY 2019: Three trauma informed care initiatives will be implemented.</li><li>FY 2020: Five trauma informed care initiatives will be implemented.</li></ul>
Source of Data and Data Explanation	The initiatives for trauma informed care will be developed, reviewed and implemented with assistance of the Health Department Management Team. All initiatives with a work plan that has completed action steps will be considered "implemented".

Frequency data will be analyzed	Semi-annually
Baseline	FY 2017: The Trauma Sensitive Organization Self-Assessment was
Measurements	completed.
Responsible Party	Health Promotion Specialist (assigned to work on Trauma Informed Care), Health Officer

Mental Health: Objective 2	Flathead City-County Health Department will train community members in Mental Health First Aid.
Performance Metric	Number of community members trained in Mental Health First Aid.
Reasoning for Metric Choice	Mental Health First Aid is an 8-hour course that teaches attendees how to identify, understand and respond to signs of mental illness and substance abuse disorders. The training gives attendees the skills needed to reach out and provide initial health and support to someone who may be developing a mental health or substance abuse problem or experiencing a crisis. Suicide is a major public health issue in the state of Montana, as the adult suicide rate in Montana is significantly higher than the nation. Montana has been at or near the top of the nation for rate of suicide for nearly 30 years and Flathead County has been at or near the top of the list for completed suicide in the state of Montana. Important programs such as Question, Persuade and Refer have been implemented in Flathead County to teach residents to deal with those at immediate risk of suicide however; there is a need for more training on how to deal with mental health and substance abuse prior to the point that a person is suicidal.
Target/Benchmark	FY 2018: Health Department employee will be trained in Mental Health First Aid FY 2019: 75 Flathead County residents trained per year FY 2020: 100 Flathead County residents trained per year
Source of Data and Data Explanation	The Health Department will maintain the list of completed Mental Health First Aid trainings conducted, as well as the rosters of participants.
Frequency data will be analyzed	Annually
Baseline Measurements	FY 2017: No Health Department employee trained to provide Mental Health First Aid.
Responsible Party	Health Promotion Coordinator and Health Officer

## **PRIORITY AREA: Access to Services**

Flathead City-County Health Department seeks to provide access to needed services for all residents of Flathead County.

**GOAL:** Increase public health services to the underserved in Flathead County (expand services provided outside of the County campus).

Access to Services: Objective 1	Flathead City-County Health Department will increase services provided to the underserved areas of Flathead County.
Link to Community Health Improvement Plan	<i>Community Health Improvement Plan Goal:</i> Improve access to medical and oral health care.
Performance Metric	Number of public health services regularly offered at an outlying location.
Reasoning for Metric Choice	Access to healthcare is a determining factor in the health of a population. People without access to healthcare may lack preventative care, which could result in greater negative health outcomes. Flathead County is a large rural area with a small public transportation network. Seeking ways to expand the locations that public health services are offered will increase access to disadvantaged populations. Both the Canyon area and Evergreen have been identified as areas that additional public health services would benefit the health of the community.
Target/Benchmark	FY 2018: WIC and Immunization services expanded to Evergreen FY 2019: WIC and Immunization services expanded to Canyon FY 2020: Funding secured to provide increase space for the operation of additional community services in Canyon and Evergreen (e.g. health clinic, Agency on Aging, etc)
Source of Data and Data Explanation	The data will be tracked in a Performance Management System tracking spreadsheet.
Frequency data will be analyzed	Semi-annually
Baseline Measurements	FY 2017: Immunizations are currently offered 1x/month in Whitefish and Columbia Falls, WIC services are offered 1x/month in Columbia Falls.
Responsible Party	Health Officer, WIC Coordinator, Immunization and Communicable Disease Coordinator

## **PRIORITY AREA: Immunization**

Immunizations are a key public health disease prevention measure. Montana has been one of the lowest ranked states in the nation for childhood immunization rates. In addition, residents of long-term care and assisted living facilities are at increased risk of complications or death related to influenza but data has shown that the immunization rates among staff at these facilities have room for improvement.

**GOAL:** Improve immunization rates in healthcare providers and in school-aged children.

Immunizations: Objective 1	Increase the number of assisted living/long-term care facilities with a mandatory influenza vaccination policy.
Link to State Health Improvement Plan	Montana System Improvement Strategy: Support health care settings to implement policies encouraging appropriate immunizations for employees and patients.
Performance Metric	The number of Flathead County registered assisted living and long- term care facilities that have a mandatory influenza vaccination policy.
Reasoning for Metric Choice	Vaccination of healthcare workers has shown to reduce influenza infection and absenteeism among healthcare workers, prevent mortality in patients and result in financial savings to health institutions. The best way to prevent the transmission of influenza to patients served is to mandate healthcare worker vaccination against influenza on an annual basis.
Target/Benchmark	FY 2018: 1 additional facility FY 2019: 3 additional facilities (cumulative) FY 2020: 5 additional facilities (cumulative)
Source of Data and Data Explanation	Flathead City-County Health Department will conduct an annual survey of assisted living and long-term care facilities to determine the number that have mandatory influenza vaccination policies.
Frequency data will be analyzed	Annual
Baseline Measurements	FY 2017: 5 facilities
Responsible Party	Immunization and Communicable Disease Coordinator, Health Officer

Increase the number of schools with kindergarten immunization rates above 90% for required vaccines.

Link to State Health Improvement Plan	Montana System Improvement Strategy: Implement quality improvement activities that improve the delivery of clinical preventive services and the use of clinical practice guidelines (e.g., childhood immunizations, reproductive health plans, highly effective contraceptives for women who choose contraception, reduced induction and early elective cesarean sections).
Performance Metric	The percentage of Flathead County schools with greater than 90% vaccination rates for required vaccines of students entering their kindergarten year.
Reasoning for Metric Choice	Immunizations are an important piece of maintaining the health of the community especially as children are considered a vulnerable population. Increasing immunization rates among the kindergarten classes will help protect all Flathead County schools. Flathead County as a community meets a 90% vaccination rate for kindergarten age students in MMR and Dtap (91.3%, 89.7% respectively). However, when assessed on a school-by-school basis, many individual schools fall well below this benchmark, leaving some kindergarten classrooms, or whole schools lacking herd immunity and unprotected from these preventable infections. By focusing on these schools, we will increase the level of protection to the community equally throughout the county.
Target/Benchmark	School Year 2017-2018: 75% School Year 2018-2019: 90% School Year 2019-2020: 100%
Source of Data and Data Explanation	Montana Department of Public Health and Human Services collects an annual survey of immunization records per school for all Flathead County Schools. This information is shared with the Health Department and tracked per school year for trend analysis.
Frequency data will be analyzed	Annual
Baseline Measurements	School Year: school year 2016/2017 - 50% of schools <90% MMR/Dtap.
Responsible Party	Immunization and Communicable Disease Coordinator

### **Future Direction**

The Flathead City-County Health Department is aware that there are always emerging issues that may impact the health of the community. Below is a listing of items/topics that the Health Department is reviewing to determine the need for updated or new strategic goals and objectives:

- Social Determinants of Health
- Health in All Policies
- Environmental Stewardship
- Healthy Lifestyles