

Strategic Plan

2018-2022



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LETTER FROM THE HEALTH OFFICER AND BOARD OF HEALTH CHAIRPERSON

A strategic plan is a formal and ongoing process of developing, implementing, and evaluating goals to guide the actions and decisions for the future. This plan spans from 2018 through 2022 and focuses on continuous quality improvement, workforce development, communication, environmental health and advocacy.

Wauwatosa Health Department (WHD) is a vibrant agency which serves the entire community. Looking back from 2013 to the present, much progress was made toward accreditation, which was awarded to WHD by the Public Health Accreditation Board (PHAB) in November, 2015. The 2018-2022 Strategic Plan continues our focus on quality improvement, performance management and the pursuit of innovation across all programs and services we offer.

The strategic planning process encouraged us to imagine the future of public health in the community, to celebrate successes, and define strategies to reach new goals. We are up to the challenge to move forward, continue excellent customer service, and maintain/create new community partnerships to improve health and quality of life.

Laura Conklin

Laura Conklin, MPH Health Officer

Christine Shaw

Christine Shaw, PhD, APRN Board of Health Chairperson





VISION, MISSION, AND CORE VALUES

OUR VISION

Healthy Community; Value to You; Nationally Recognized; Wauwatosa Health Department

OUR MISSION

To protect, promote, and assure conditions for the health and safety of all residents and visitors of Wauwatosa through the assessment of needs, assisting in the development of public health policies, and the provision of accessible, quality services.

CORE VALUES

WHD achieves a high level of professionalism by demonstrating the following values:

We demonstrate <u>TEAMWORK</u> through collaboration with each other and community partners.

We value and respect <u>DIVERSITY</u> by identifying and minimizing health disparities.

We honor the public's trust and maintain the highest standards of INTEGRITY through accountability and ethics.

We take a <u>PROACTIVE</u> approach in all that we do to meet the needs of our community.

We value effective, responsive, and timely <u>COMMUNICATION</u> in our role as a trusted source of health information.

KEY TERMS

Environmental Health

The National Environmental Health Association defines environmental health as "the science and practice of preventing human injury and illness and promoting well-being by: identifying and evaluating environmental sources and hazardous agents; and limiting exposures to hazardous physical, chemical, and biological agents in air, water, soil, food, and other environmental media or settings that may adversely affect human health." ¹

Health

The World Health Organization defines health as "a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity. The highest standards of health should be within reach of all, without distinction of race, religion, political belief, economic or social condition."

Health Disparities

Health disparities are differences in health status based on social, economic, political, environmental, or demographic factors. According to Healthy People 2020, "Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion." Identifying health disparities is one way to measure progress toward achieving health equity. ³ ⁴

Health Equity

According to Healthy People 2020, Heath Equity is "the attainment of the highest level of health for all people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities." ³

Quality Improvement (QI)

As defined by the National Association of County and City Health Officials, QI is an improvement process that focuses on activities that respond to community needs and improve population health. QI is

deliberate, defined, and continuous effort to achieve measurable improvements in the quality of services or processes which achieve equity and improve the health of the community. ⁵

Social Determinants of Health

Social determinants of health are the living and working conditions that influence individual or community opportunities to be healthy. These factors can include race, gender, sexual orientation, education, income, occupation, and zip code. ⁶



National Environmental Health Association: http://www.neha.org/about-neha/definitions-environmental-health

World Health Organization: http://www.who.int/about/mission/en/
Healthy People 2020: https://www.healthypeople.gov/2020

⁴ American Public Health Association: https://www.apha.org

National Association of County and City Health Officials: http://archived.naccho.org/topics/infrastructure/accreditation/quality.cfm

⁶ Human Impact Partners: https://humanimpact.org



Purpose

The purpose of the WHD Strategic Plan is to:

- 1. Define and communicate department strategic priorities, goals, and objectives to the Board of Health, WHD staff, stakeholders, and the community.
- 2. Establish direction and a timeline for the WHD to achieve its goals.
- 3. Provide a basis for internal decision making, resource allocation, evaluation, and quality improvement.

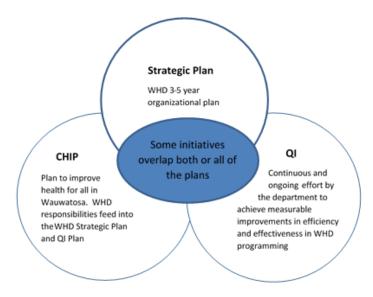
Background

Strategic planning is a process for defining and determining an organization's roles, priorities, and direction over three to five years. A strategic plan sets forth what an organization plans to achieve, how it will achieve it, and how it will know if it has been achieved. The strategic plan provides a guide for making decisions on allocating resources and taking action to pursue strategies and priorities. A health department's strategic plan focuses on the entire health department (PHAB Standards and Measures, Version 1.5, Standard 5.3).

Development of the agency strategic plan is led by the health department and its governing body with internal stakeholders and key external stakeholders providing input, as needed, into the process (NACCHO, Developing a Local Health Department Strategic Plan, page 8). The strategic plan is based on organizational mandates, mission, vision, core values, and data that define the strengths, weaknesses, opportunities, and threats related to the organization.

In developing the strategic plan, the health department takes into consideration the results of the Community Health Assessment (CHA) and aligns priorities with the Community Health Improvement Plan (CHIP) and Quality Improvement (QI) system as appropriate.

The figure to the right illustrates the relationship between the CHA, CHIP, QI, and the Strategic Plan.



The Community Health Assessment (CHA) informs all three plans

Process

The strategic planning process was led by the WHD Management Team (WMT), which consists of the Health Officer, the Supervisor of Nursing, and the Public Health Manager. The WMT met with the Board of Health (BOH), WHD staff, the Wauwatosa Mayor and City Department Heads, and several stakeholders and community partners to gather input for the Strategic Plan. The Board of Health met several times during the process to offer input and approve the plan. The time frame for the strategic planning process was:

- June 2016 through December 2016 SWOT analysis, stakeholder meetings
- January 2016 through December 2017 CHA and CHIP development
- March 2017 through December 2017 Strategic Plan development and feedback
- January 2018 Strategic Plan approval

Along with reviewing CHA data and CHIP priorities, the WMT gathered feedback from residents, community leaders, and community partners to conduct a Forces of Change or Strengths, Weaknesses, Opportunities, and Threats (SWOT) analysis to better understand perceived strengths and weaknesses of WHD and the Wauwatosa community and to learn more about trends and external factors that could impact future health planning. The following are the sources of our SWOT data.

- The WMT conducted a SWOT analysis with the BOH on August 16, 2016 and with WHD staff at a meeting on July 28, 2016.
- SWOT data was collected during a series of focus groups with community partners, community leaders, and stakeholders.
- SWOT data was collected through an online survey. The survey was open September through December 2016. 139 surveys were completed, 89% of respondents were Wauwatosa residents.
- The results of the SWOT analyses are presented in Appendix A with a summary of the findings presented in Appendix B.

Mobilizing for Action through Planning and Partnerships (MAPP) is a framework that brings a variety of organizations, groups, and individuals together as a public health system to create and implement a community health improvement plan. The MAPP process encourages the public health system to create a well-coordinated plan that uses resources efficiently and effectively, allows for creative solutions to public health problems, and considers a community's unique context and character. MAPP was used during the development of the WHD CHA.

MAPP consists of six phases:

- Organizing for Success and Partnership Development
- 2. Visioning
- 3. Four Assessments
- 4. Identify Strategic Issues
- 5. Formulate Goals and Strategies
- 6. Action Cycle

See Appendix C for access to the full MAPP Assessment.

Heather Community

ROADMAP TO HEALTH!

MAPP - YOUR COMMUNITY
ROADMAP TO HEALTH!

Organize for Success / Partnership Development

STRATEGIC PRIORITIES, GOALS, AND OBJECTIVES

WHD identified 5 strategic priorities to work on over the next five years:

- 1. Visibility
- 2. Communication
- 3. Workforce Development
- 4. Continuous Quality Improvement
- 5. Ensure a Safe and Healthy Environment

WHD will address the strategic priorities using the following:

- Goals: Goals reflect the overall approach that will be used to address each priority.
- Objectives: Objectives are specific and measurable statements of what will be done to achieve each goal.
- Actions: Actions are short term activities that will be completed to address each
 objective. Actions can be adjusted as needed to reflect changes in funding, timelines,
 and other department priorities.
- Responsibility: Responsibility for each activity will be assigned to a WHD committee.
 The management team will review the Strategic Plan quarterly to monitor progress on the objectives.
- Progress: Progress will be shown using the VMSG (Vision, Mission, Services, and Goals) Dashboard Public Health Performance Management System. The VMSG Dashboard will list projected due dates, assign staff to projects, and show progress toward goals. Modifications to the Strategic Plan will be addressed during monthly management meetings and will be reflected on the VMSG Dashboard.

Strategic Priority #1: Visibility

Rationale: Health departments can become more visible to policymakers, the media, and the public through collaboration and advocacy efforts. WHD seeks to increase visibility through communication with new and existing community partners, local alderpersons, and the Board of Health. WHD will also expand participation in advocacy efforts with policymakers to ensure health equity in the Wauwatosa community. These efforts will increase awareness of WHD programs and services and maintain financial sustainability for the future of the department.

Goal 1.1: By December 31, 2022, create new community partnerships, as well as strengthening and enhancing existing ones.

Objective 1.1.1: By June 30, 2018, develop an inventory of current WHD community partners and maintain list annually.

Objective 1.1.2: By December 31, 2018, and annually thereafter, identify potential new partners and contact names with mutual missions, goals and objectives.

Objective 1.1.3: Beginning June 30, 2018, and continuing quarterly thereafter, send an e-newsletter to all community partners updating the membership on WHD's activities and successes within the previous quarter.

Goal 1.2: By December 31, 2022, increase public health advocacy.

Objective 1.2.1: By December 31, 2018, and continuing regularly thereafter, continue to monitor national, state, and local legislative activity and updates. Share status and updates at monthly all-department meetings

Objective 1.2.2: As needed, the Board of Health will send advocacy letters on issues rising to their level of action.

Objective 1.2.3: By June 1, 2018, and continuing every even year thereafter, educate new alderpersons on WHD services, programs, and activities through an orientation packet and meeting invitation with the Health Officer.

Objective 1.2.4: By February 1, 2018, investigate the possibility of including WHD marketing materials in the alderperson application process.

Objective 1.2.5: By March 30, 2018 and continuing quarterly thereafter, WHD personnel will present before the City Council and/or standing committees on WHD successes.

Objective 1.2.6: By January 1, 2019 and annually thereafter, WHD staff will celebrate the Board of Health with a small "thank you" celebration each year during a regularly scheduled Board of Health meeting.

Objective 1.2.7: By February 28, 2018 and regularly thereafter, one member of the WHD nursing, environmental health and/or clerical staff will provide a brief programmatic report at each Board of Health quarterly meeting.

Strategic Priority #2: Communication

Rationale: Local health departments are responsible for educating the public about health conditions and risks, research on public health issues, and situations in the community that may increase the spread of a health problem. By developing a Branding Strategy that can be integrated with the existing Communications Plan, WHD will streamline internal communications and ensure that relevant health information and the value of WHD services and programs are communicated to the public in an effective and targeted manner.

Goal 2.1: Strengthen internal organizational communication within WHD.

Objective 2.1.1: By September 30, 2019, and every two years thereafter, review and update the WHD Communications Plan.

Action: Annually review existing communications documents and brochures and add new pieces as needed.

Action: Update logos and branding (colors and fonts) for all documents as they are reviewed.

Action: Add WHD website and social media links to all appropriate agency templates.

Goal 2.2: Provide relevant, accurate, and accessible health information to the Wauwatosa community.

Objective 2.2.1: By December 31, 2018, develop, implement, and annually update a WHD Branding Strategy.

Action: Establish communication methods to increase awareness of health equity in Wauwatosa.

Action: Identify appropriate channels for targeted communication, including the WHD website, social media, newsletters, and other resources, to effectively disseminate public health messages and strengthen our marketing presence.

Action: Following the creation of the WHD Branding Strategy, assess the use of the WHD website and social media outlets bimonthly to communicate relevant public health topics.

Objective 2.2.2: Be viewed as a primary reference source of public health information and priority community health messages.

Action: Publicize all new grants and awards in local media.

Action: Update the public on WHD advocacy efforts.

Action: Provide annual communication and updates on Wauwatosa CHIP priorities.

Objective 2.2.3: Use the WHD website and social media platforms to inform and educate the public.

Action: By April 2018, update to the new WHD website and continue to monitor usage and trends.

Action: Increase the number of views on the WHD website by 10% each year.

Action: Increase the number of followers on the WHD Facebook page by 5% each year.

Strategic Priority #3: Workforce Development

Rationale: Effective public health practice requires a well-prepared and sufficient workforce. Using the WHD Workforce Development plan, WHD will assess staff competency levels and support opportunities to increase skills and knowledge so that staff can continuously improve the quality of public health services and programs that are offered to the residents of Wauwatosa. Additionally, WHD will work with community and academic partners to provide education and awareness of the public health system.

Goal 3.1: By June 30, 2018 revise the WHD Workforce Development Plan.

Objective 3.1.1: Create a baseline measurement of individual staff competencies by March 31, 2018 and reassess competency levels annually.

<u>Action:</u> Staff will complete the Council on Linkages Core Competencies for Public Health Professionals Assessment and the Centers for Disease Control 15 Preparedness Capabilities Assessment by December 31 annually.

Objective 3.1.2: Create a system to support individual staff professional development by December 31, 2018.

Action: WHD will generate a hierarchy of Workforce Development (WFD) opportunities by creating a document outlining trainings/conferences that are:

- Required by grants/statutes
- Needed by WHD to advance CHIP and PHAB initiatives
- Desired for individual personal development.

Action: Create a list of staff licensure and/or degrees to include any additional training needed to maintain those licenses.

Action: Develop a resource binder to outline WFD tools and funding sources.

Goal 3.2: By December 31, 2022, establish and sustain local collaborations with community partners and surveillance site members to increase awareness of the Public Health System.

Objective 3.2.1: Identify community partners that are required to provide WHD with information that meets public health reporting requirements by June 30, 2018.

Action: Establish a policy to ensure these community partners are updated annually on their public health reporting responsibilities by December 31, 2018.

Objective 3.2.2: Identify and establish potential academic partners at the secondary school and collegiate level(s) for opportunities to promote public health awareness, training, and education.

Action: By March 31, 2018, the Quality Improvement Advisory Committee will develop a list of potential projects, research needs, or activities a student or intern could assist with annually.

Action: Create and maintain a list of academic partner institutions that WHD is associated with to help enhance the Public Health System.

<u>Action:</u> WHD will make itself available to attend at least one career fair at an academic institution annually to promote the field of public health and WHD to qualified young professionals.

Strategic Priority #4: Continuous Quality Improvement

Rationale: WHD seeks to advance quality and performance within the department. Working through the WHD Quality Improvement Plan, WHD will identify opportunities to improve management, enhance leadership, and expand relationships within the community. Additionally, WHD will increase capacity for information management by expanding data collection and performance management with the use of new tools and databases. WHD will seek reaccreditation to certify agency expertise and high quality services provided to the public, attract future funding and grants, and recruit/retain high quality staff.

Goal 4.1: Create a culture of continuous quality improvement by December 31, 2022.

Objective 4.1.1: Implement VMSG Dashboard Performance Management Tool by December 31, 2018.

Action: Staff will receive baseline training on the Performance Management Tool by June 30, 2018 and refresher training by December 31, 2018 to assess understanding and conformity to the tool by all staff.

Action: Establish health equity and cultural competency frameworks for WHD initiatives to be measured against by June 30, 2018.

Objective 4.1.2: Continuously involve all staff members in quality improvement training.

Action: Revise the WHD Quality Improvement Plan by June 30, 2018.

Action: Management team will schedule QI tool refresher training annually for all staff and also upon hire of new staff members.

Objective 4.1.3: Complete the steps for successful reaccreditation by December 31, 2020.

Action: Complete the PHAB annual report each year by December 31.

Action: By April 30, 2018, the accreditation coordinator will present a report of the strengths and areas of improvement for each domain to be addressed for reaccreditation.

Action: By July 31, 2018, a plan will be developed to address areas of need to reach the plan of reaccreditation.

Action: By March 30, 2019, a plan will be adopted to outline a timeline and staff responsibilities for reaccreditation requirements.

Action: Submit reaccreditation application by October 31, 2020.







Strategic Priority #5: Ensure a Safe and Healthy Environment

<u>Rationale:</u> WHD is committed to protect and promote environmental health in Wauwatosa by improving programming, information management, data collection, and evaluation. WHD seeks to establish baseline environmental health data for the City of Wauwatosa to better address the needs of the community. Staff will achieve these goals by researching evidence-based health promotion strategies and obtaining input from target audiences.

Goal 5.1: Improve WHD environmental health programming by December 31, 2022.

Objective 5.1.1: By December 31, 2019, improve WHD response to Human Health Hazards (HHH) in Wauwatosa.

<u>Action:</u> Enhance relationships with key community partners to increase WHD staff awareness of existing HHH issues, improve response, and prevent situations from becoming worse.

Action: Identify staff training needs on mental health, cultural competency, health equity, and other relevant topics.

Objective 5.1.2: By December 31, 2018, provide city-wide education around rat activity in Wauwatosa.

Action: Educate the community about rats through a variety of methods including door hangers, newsletters, email blasts, and social media.

Action: Use GIS to map rat activity and analyze trends in sightings and infestations.

Objective 5.1.3: By December 31, 2022, reduce the number of dog bites in Wauwatosa by 5%.

Action: Review the Rabies Exposure and Control policy by December 31, 2018 and every 3 years thereafter.

Action: Educate pet owners on good ownership practices and the requirements in the City Ordinance including licensing,

rabies vaccines, and leash laws.

Action: Educate the general community on how to interact with dogs and avoid dog bites.

Objective 5.1.4: By December 31, 2018, increase establishment owner knowledge of the WHD State Agent Contract requirements.

Action: Review the Food Inspection policy by January 31, 2018 and every 3 years thereafter.

Action: Educate establishment owners on code requirements and the inspection process.

Action: Conduct timely investigations of complaints.

Goal 5.2: Evaluate and address unmet environmental health needs in Wauwatosa.

Objective 5.2.1: By December 31, 2018, improve data collection related to environmental health concerns in Wauwatosa.

Action: Beginning in January 2018, use HealthSpace to track all environmental health complaints.

Action: In January 2018, begin to use the new internal time-tracking system.

Action: Work with the GIS manager to map data trends in various environmental health topic areas.

Objective 5.2.2: Beginning in 2019, conduct an environmental community health assessment every 3 years to assess population health status related to environmental conditions in Wauwatosa.

Action: Use the improved data collection methods to analyze data and identify trends in health problems and environmental public health hazards.

<u>Action:</u> Gather supplementary information through additional data sources.

Action: Collaborate with key stakeholders and community partners to identify environmental health issues and assets.

Action: Use the assessment results to evaluate and improve environmental health programming and guide future efforts.

Acknowledgements

WHD would like to thank the following for their help on the Strategic Plan and for their ongoing commitment to improving the health of Wauwatosa.

Board of Health

John Dunn, MD, Chairperson
Chris Shaw, PhD, FNP, Vice Chairperson
Cheryl Davies, RD, Secretary
Leslie Martin, MD
Bobby Pantuso, Alderperson (ex officio)
Laura Conklin, MPH, Health Officer (ex officio)

Wauwatosa Management Team

Laura Conklin, MPH, Health Officer Courtney Day, RN, BSN, Supervisor of Nurses Laura Stephens, MPH, Public Health Manager

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Andy Budde, RS, MS
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Ericka King, RN, BSN
Cindi Lambert, RN, BSN
Jill McGuire, RN, BSN
Paige Miller, RN, BSN
Diane Schindler, RN, BSN
Lisa Simonds, Administrative Assistant
Meghan Spredemann, REHS/RS





Appendix A: Forces of Change Analysis Results

	Compiled by the City of Wauwatosa Health Department, Summer 2016			
	Forces (trends, events, factors)	Threats Posed	Opportunities Created	
		Tilleats Foseu	support for public health programs and policies	
	Supportive City Administration (Mayor		increase communiciation and partnerships with City,	
	relected for 4 years, through 2020)		businesses and health organizations	
_	Younger City Council	possible disconnect with population, especially elderly	opportunity for education and prioirty setting	
ega		(technology, needs)		
Political / Legal	2017 Presidential change	Unknown at this time possible revenue change for the department	Unknown at this time	
8	DHS/DATCP inspection program merger	could change Environmental Health program	possible revenue change for the department could change Environmental Health program	
₹		increase need of Police/Fire/City services	increase partnership between PH/Police/Fire	
	Unknown future of Milwaukee County Mental Health facility	unknown sufficiency in residential facilities elsewhere	opportunity for training and emergency preparednes	
		in Wauwatosa	related to mental health issues	
			continues disccussion about mental health as a public	
			health priority	
	Push for affordable housing	need to monitor shift in demographics to stay aware of population needs	seniors able to remain in Wauwatosa	
		population	new populations (young families, students, mixed	
			income, etc) able to live in Wauwatosa	
	Steadily decreasing City budgets	some departments (PH, PD, Fire) need to do more with	partner to improve program outreach and efficiency	
Economic		less money	, , , , , , , , , , , , , , , , , , , ,	
0		predicting an increase of 5000 residents in the next 5 years		
ŭ			investigate and apply for grants to address public hea	
	Public Health funding and grant money varies	constantly defending budgets	priorities and programs	
			new and strengthened partnerships	
	City is expanding business districts	challenge to green space and recreation	increase City revenue	
	City looking at efficiency	not always the best option; doesn't always lead to the		
		best product limits on what the City can provide online (social media,		
	More information and services available	fee collection, etc)		
	online	City website not always user friendly	rethink website	
		legal issue storing social media	better service delivery	
	Increase use or dependence on technology	reaching people of all ages, incomes, etc	various platforms available to reach different	
ט		reaching people of all ages, incomes, etc	populations	
			ease and ability to coordinate and communicate pub	
5			health messages ability for distance learning and training; video	
			followups	
9		sleep and social problems		
rechnology / science	Youth use of cell phones	parents are bad role models; need to put phones down	parent educaton needed on appropriate use/limits (devices in bedroom, at night, etc)	
ŭ		parents are bad role models, need to put phones down	devices in bearoom, at riight, etc)	
	Recording/filming interactions by various	exposure of private/personal health info		
	departments and public (also social/ethical)		improve coordination and communication of inspect	
	Use of HealthSpace enviornmental database		data	
			improve efficiency of Envirnomental Health Program	
	Emerging infections and disease	staying on top of knowledge and surveillance		
	Rapid Transit, new bus line	change in traffic patterns	change in traffic patterns	
			improve transportation to Medical Complex	
Ü	Green Space vs. Development		green space - oppportunity for recreation for all green space - oppportunity for education on persona	
cnvironmental			safety	
Ž	Public Piling	no helmet required	increase bicycle riding	
۵	Bublr Bikes	bike theft	improve transportation/access	
	Streetscape - built environment	traffic/safety; change in traffic patterns	improve pedestrian and biking safety	
	Changing demographics; greater diversity (race, religion, immigration, gender identity)	continuously monitor population and needs	opens discussion about diversity in Wauwatosa	
		stereotypes and beliefs of different groups	increase awareness of different lifestyles and belief	
			systems address differences in schools (guidance, speakers,	
		tension among groups (between race, police, religion)	outreach)	
		best communication to older adults		
	Baby Boomers are retiring; aging population	Department on Aging has narrow scope of service, isn't	£	
		available 24/7	form new partnerships to address needs	
ĺ		need to differentiate between mental health issues and	training for PH/Fire/PD	
		dementia	_	
Social / Etilical	Mobile Integrated Healthcare		improves care/safety of vulnerable populations;	
Ď			increases opportunities for partnerships as core caus are addressed	
	Emerging health concerns		are dadressed	
	mental health and suicide	stress, bullying, etc need to be addressed early on	address topics in schools; partner with Project TEAM:	
	e-cigs especially among youth		policy to reduce access/use	
	heroin	medications help but also perpetuate problem		
	gun violence			
	gun violence			
	Changing role of Public Health	skill base - how to maintain mandatory skill if there are few opportunities to practice or use the skill		

Appendix B: Forces of Change Analysis Summary

The Forces of Change Assessment conducted with staff, the Board of Health, and community members, analyzes the strengths, weaknesses, opportunities, and threats (SWOT) facing the Wauwatosa Health Department and the Wauwatosa Community. The results were compiled into 5 categories: political/legal, economic, technology/science, environmental, and social/ethical.

Political/Legal:

The major political forces identified during the analyses are a supportive City administration and a young City Council. This indicates that there is strong support for public health programs and policies but that WHD has an opportunity to educate the Council and set priorities for the future. One strength for WHD is the City's continued commitment to public health and accreditation. WHD has strong relationships with existing community partners, but there is an opportunity to build on the relationships with the City, Wauwatosa businesses, and health organizations.

Economic:

The most prevalent economic factors facing WHD are funding and an expanding city. The population of Wauwatosa is expected to grow by 5,000 residents over the next 5 years. However, the City budgets are steadily decreasing - meaning that WHD will have to do more with less money. Additionally, public health funding and grant money can vary from year to year. These factors present WHD with the opportunity to investigate and apply for new grants to ensure financial sustainability. There is also an opportunity to develop new partnerships to improve program outreach.

<u>Technology/Science:</u>

Over the past several years, there has been an increase in technology use, which has caused more information and services to become available online. This shift can threaten WHD's ability to reach the entire population, especially as the senior population does not consistently access technology. However, this supplies WHD with the opportunity to research various platforms for communication. Moreover, technology offers the advantage of easy, accessible communication methods, new information management systems, and the ability for staff to participate in training opportunities online. One identified technological weakness of WHD is the Health Department website. The City website is not user friendly and WHD will be challenged to rethink how this platform is used.

Environmental:

The biggest environmental force in Wauwatosa is the continued growth and development throughout the City. While this can pose threats to green space or traffic safety, there are opportunities for WHD to improve pedestrian and bike safety. WHD can advocate among policymakers, educate the public on personal safety, and raise awareness of the value of recreation and access to green space within Wauwatosa.

Social/Ethical:

As Wauwatosa grows, there are changes in population demographics and new, emerging health concerns. While the residents become more diverse, WHD strives to monitor changing trends. This creates a chance to strengthen community awareness around cultural competency and health equity. Furthermore, as the City changes, new health concerns continue to arise. Recently, mental health, substance use, and gun violence have become more prominent areas of focus for public health. While these factors can pose threats to the health of Wauwatosa residents, WHD has the opportunity to educate the public and address these issues with different areas of the population. As these forces change the City of Wauwatosa, the role of Public Health changes to meet the needs of the citizens.

Appendix C: Additional Resources

WHD Community Health Profile (CHP)

http://www.wauwatosa.net/DocumentCenter/View/4377

S:\Department Folders\Health\CHA CHIP Healthy Wauwatosa\CHA Process\CHA 2016

By law, local health departments are required to conduct an ongoing community assessment to determine local strengths and needs as a foundation for community programming. The Community Health Profile (CHP) serves as a summary report of a comprehensive community health assessment conducted between January 2016 and March 2017. The City of Wauwatosa Health Department (WHD) took the lead in organizing and conducting the assessment, however the project was only possible with the support and collaboration of the City of Wauwatosa Administration, Wauwatosa Board of Health, and a large number of community organizations and residents.

Mobilizing for Action through Planning and Partnerships (MAPP)

http://www.wauwatosa.net/DocumentCenter/View/4377

S:\Department Folders\Health\CHA CHIP Healthy Wauwatosa\CHA Process\CHA 2016

Mobilizing for Action through Planning and Partnerships (MAPP) is a process used during the Wauwatosa Community Health Assessment (CHA). Every five years, WHD, in collaboration with community organizations, stakeholders and residents, undergoes a strategic planning process to improve the health and wellbeing of all Wauwatosans. WHD facilitated the MAPP process in Wauwatosa, bringing together over 25 community partners under the common vision of "Creating a Healthy Wauwatosa for All."

WHD Community Health Improvement Plan (CHIP)

http://www.wauwatosa.net/DocumentCenter/View/4375

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A community health improvement plan (CHIP) is a long-term, systematic effort conducted every 5 years to address public health problems in a community. The CHIP is developed collaboratively and defines a vision for the community's health. To ensure the CHIP reflects the needs of the community, WHD conducts thorough assessments at five-year intervals along with regularly monitoring available health data. With the completion of the Community Health Profile, the community continued with the MAPP Framework to facilitate the development of the CHIP.

WHD Quality Management Plan

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WHD Workforce Development Plan

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WHD Communications Plan

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WHD Cultural Competency Plan

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