

Strategic Plan

DAKOTA COUNTY PUBLIC HEALTH
ADOPTED JULY 2022

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Message from the Director

The COVID-19 pandemic sent ripples through our communities, affecting individuals, families, businesses, and the work we conducted at the county level. One impact was pausing the work being done on the 2018 – 2020 Strategic Plan. Near the end of 2021, Public Health's strategic planning team met to review the plan's progress, assess the department's current internal and external priorities, and propose modifications to the plan based on these findings. The result of that effort is this plan.

After reviewing and assessing the 2018 – 2020 plan, the strategic planning team determined that most of the goals and objectives were still very relevant. While all the strategic plan efforts were paused during the COVID-19 response, it was determined that all the incomplete objectives could still be finished before the end of 2023.

As part of reviewing the department's post-pandemic priorities, the strategic planning team also engaged the health department for feedback. The feedback resulted in two new additions to the plan: adding a COVID-19 focus to Goal 1.2 (identifying COVID-19 resources to further address health equity and social determinants of health) and adding a new Goal 2.3 (department increasing and maintaining resilience).

I'm proud that we've been able to pick back up this essential work. I'm looking forward to seeing the results of this plan, both for the impacts to our staff and the communities we serve.

Gina Adasiewicz

Director, Dakota County Public Health

About this plan

This strategic plan was developed to guide Dakota County Public Health's work in 2022 and 2023. It outlines what the department can do internally to improve work and partnerships and maximize efforts. In addition to this strategic plan, Public Health collaborates with community partners to develop and implement a Community Health Improvement Plan (CHIP) every five years. The CHIP will continue to guide the department's work externally with the community and partners in Dakota County.

This strategic plan was purposely designed to align with the plans and work of the Dakota County Community Services Division and Dakota County Board of Commissioners. Over the next two years, Public Health will continuously participate in the work of the Division and County to ensure the most efficient outcomes

Community Services Strategic Priorities

- Improved outcomes for people
- Inclusion, diversity, and equity
- Employee health and well-being
- Operational excellence

County Board Strategic Plan Goals

- A great place to live
- A healthy environment with quality natural areas
- A successful place for business and jobs
- Excellence in public service

Our vision

A healthy community for all in Dakota County.

Our mission

Building healthy individuals, families, and communities in Dakota County through partnerships to prevent disease, disability, and injury; promote physical and mental wellbeing and safety; and protect health and the environment.

Vision elements

- A workforce that actively practices cultural humility
- Working in partnerships to address Social Determinants of Health
- Sharing power with the community
- Committed, informed, and engaged leadership
- Innovative, interactive communication with all
- Effective and innovative operations

Our values

Excellence

We ensure a high level of quality in our practice by using data-driven and science-based decisions, a commitment to addressing root causes and applying innovative methods.

Effective and Sustainable

We have the resources and capacity to engage our community in developing and providing effective, efficient services that are responsive to all. We ensure a strong, sustainable public health infrastructure with dedicated and skilled staff, effective technology, and material resources to respond to community health threats and public concerns.

Inclusiveness

We serve all communities by delivering culturally and linguistically appropriate services with respect for our differences and recognition of our commonalities. This requires the courage to have difficult conversations and a commitment to health equity. We strive to create an engaged workforce that reflects our community.

Collaboration

We work in partnership with community members and leaders in the private and public sectors to create accessible, supportive communities for a lifetime that enable all people to lead active and vital lives.

Empowering People

We support making "the healthy choice the easy choice" and aim to build trust to partner with people and families to help them achieve their highest level of health. We work with public and private health care systems and community organizations to implement integrated, community-driven strategies to prevent and control disease and provide access to comprehensive health services for all.

Dakota County, Minnesota

Demographics

Dakota County is part of the seven-county Twin Cities Metro region. It is the third largest county in Minnesota by population. The land use is unique, with a one-third split of urban, suburban, and rural communities.

Dakota County's population grew from 398,552 in 2010 to 439,882 in 2020 – a 10 percent increase. The population is getting older and is becoming more racially and ethnically diverse. Poverty is decreasing. Populations of color have grown faster than the county's White population in the past 20 years. More information about County demographics can be found online: www.dakotacounty.us, search "Community Health Assessment."

How do we define health equity?

Everyone has what they need to achieve their highest level of health and wellness.

An increasing amount of research and dialogue shows that health equity is a public health issue. Addressing health equity is a priority for Dakota County at every level, including the Public Health Department. For the 2018-2020 and 2022-2023 strategic plans, Public Health took additional steps to incorporate a focus on health equity as we looked to the future of the department's work.

Strategic planning process

A strategic planning core team was established to guide the facilitation of meetings and planning activities. The core team consisted of the Department Director, Deputy Director, Administrative Manager, Department Epidemiologist, and Communications Coordinator. The team received significant guidance on the planning process from Julia Ashley, Public Health Consultant with the Minnesota Department of Health (MDH).

Timeline

Winter 2021: The Department Epidemiologist, Communications Coordinator, and MDH Consultant reviewed the 2018 – 2020 Strategic Plan. The group determined that many objectives had been completed and that the remaining objectives could be completed within two years (end of 2023). The group also concluded, that based on the pandemic's effects on community and county goals, a new strengths, weaknesses, opportunities, and threats (SWOT) analysis would be beneficial to determine the department's current priorities. A SWOT analysis was conducted and included the Public Health Director and Deputy Director, Managers, Supervisors, and Coordinators.

Spring 2022: The strategic planning core team reviewed the results of the SWOT analysis. This resulted in two new suggested changes to the plan: adding a COVID-19 focus to Goal 1.2 (identifying COVID-19 resources to further address health equity and social determinants of health) and adding a new Goal 2.3 (department increasing and maintaining resilience).

Summer 2022: The strategic planning core team shared the suggested changes with the entire Public Health department for feedback, including gathering interest for workgroups. Feedback was collected and reviewed by the Department Epidemiologist and the Communications Coordinator. Based on the feedback, the suggested changes were adopted. Strategic plan workgroups were formed for each objective and work on the 2022-2023 plan begun.

2022 – 2023 Public Health Strategic Plan

Priority Area 1: Dedicated resources

The Dakota County Public Health Department will dedicate resources to advancing work on health equity, social determinants of health and wellness, community health priorities, and building public health infrastructure. We will identify ways to creatively access and utilize funding sources and plan or continue to implement special projects with high-risk communities. We recognize that our work is with individuals and families as well as population-based. We aim to ensure the right resources at the right place at the right time. The department recognizes that partnerships and collaboration with other departments in the county and external organizations are essential to advance our work on health equity and social determinants of health and wellness.

Goal 1.1: In order to address health equity, the department will have identified gaps in resources and reach, and potential solutions.

Objective 1.1.1: Complete an assessment on the current scope of community outreach and engagement as part of the Community Health Assessment by 12/31/18. **COMPLETED**

Objective 1.1.2: Collaborate with partners to complete an assessment of the communities in the county who are high risk to determine gaps as part of the Community Health Assessment in reach by 12/31/18. **COMPLETED**

Objective 1.1.3: Collaborate with partners to create a plan to address assessment findings as part of the Community Health Improvement Plan by 12/31/22.

Goal 1.2: The department will have identified opportunities to maximize current staffing, financial, and COVID-19 resources to further address health equity and social determinants of health and wellness.

Objective 1.2.1: By 12/31/18, develop a framework for a department training plan that outlines a strategy for training staff on emerging topics related to a culture of health equity/social determinants of health and wellness. **COMPLETED**

Objective 1.2.2: By 12/31/23, partner with at least one community organization to identify best practices in maximizing staff and other resources.

Objective 1.2.3: By 12/31/23, partner with a collection of agencies that assist in providing COVID-19 resources and information to communities most impacted by the pandemic.

Goal 1.3: The department will improve effective and timely use of information and technology.

Objective 1.3.1: Create and implement an informatics and technology plan by 12/31/19. **COMPLETED**

Objective 1.3.2: Develop a process for prioritizing projects by 12/31/19. **COMPLETED**

Priority Area 2: Recruitment, hiring, and retention

The Dakota County Public Health Department will focus on equitable recruitment, hiring, and retention of employees. We will advocate for changes to policies and practices to allow us to recruit and hire diverse employees that represent the communities we serve. Work will be done to hire positions that can engage all of the populations we work with. We will put additional attention on efforts that retain diverse employees and develop employee skills.

- Goal 2.1: The department will employ more diverse staff that reflect the communities that we serve.
- *Objective 2.1.1*: By 12/31/23, review minimum qualifications on job descriptions with an equity lens to determine where best practices can be implemented.
- *Objective 2.1.2*: By 12/31/23, align with county and division to identify a process for applying equity best practices in hiring.
- *Objective 2.1.3*: By 12/31/23, make recommendations on innovative approaches the department can take to attract students to government public health as a career.
- Goal 2.2: The department will have increased retention rates among staff, especially those that reflect the communities we serve.
- *Objective 2.2.1*: By 12/31/18, support staff involvement in County Employee Resource Groups to promote an inclusive work environment. **COMPLETED***
- Objective 2.2.2: Formalize career coaching to be used with all staff. **COMPLETED***
- Objective 2.2.3: Update the talent management plan. **COMPLETED***
- *Objective 2.2.4*: Align with the county's performance development model as documented in the Workforce Development Plan.
- *After review in 2021, the county's performance development model includes career coaching (2.2.2) and talent management (2.2.3) and is part of the Workforce Development Plan. These two objectives will now fall under the new objective (2.2.4).
- Goal 2.3: The department will increase and maintain resilience.
- Objective 2.3.1: By 12/31/22, conduct an all-staff assessment of resilience.
- *Objective 2.3.2*: By 12/31/23, based on the staff assessment and research, identify best practices for increasing and maintaining resilience.

Performance Measures

The performance measures were developed to track progress at the Goal level. These will be analyzed annually by the Department Epidemiologist.

Goal 1.1: In order to address health equity, identify gaps in resources/reach, and potential solutions.

Measure: By December 31, 2023, potential solutions have been identified to meet up to three of the top community needs identified.

Goal 1.2: Identified internal opportunities to maximize current staffing and financial resources to further address health equity and social determinants of health.

Measure: By December 31, 2023, at least one new way to utilize staff or financial resources to address health equity or social determinants of health has been identified.

Goal 1.3: The department will improve effective and timely use of information and technology.

Measure: By December 31, 2023, increase staff satisfaction with information technology systems from 74% to 80%.

Goal 2.1: Employ more diverse staff that reflect the communities we serve.

Measure: By December 31, 2023, increase staff racial and ethnic diversity from 16% to 22%, to reflect the County population.

Goal 2.2: Increased retention rates among staff, especially those that reflect the communities we serve.

Measure: By December 31, 2023, decrease the turnover rate for racially and ethnically diverse staff from 6% to 3%.

Goal 2.3: Increased and maintained staff resilience.

Measure: This measure will be developed by the workgroup by October 31, 2023.

Monitoring

The implementation of each objective will be carried out by Public Health staff working in small teams. The core team gathered a list of staff who self-identified that they were interested in working on one or more objectives. A lead was assigned to each objective/goal, either a Supervisor or Coordinator, and a small team was formed. The teams created work plans to show action steps they plan to take to accomplish their objective(s) and will meet or communicate as needed. The leads for each team will meet quarterly to share updated on progress or barriers encountered.

Updates to the plan

The Strategic Plan will be updated annually by the core team, as needed. Leads from each team will share accomplishments, barriers, or setbacks with the core team during quarterly meetings. This document will be updated accordingly. Progress and updates on the plan will be shared with all department staff each October and with the Public Health Management Team each September.