

Healthy  
people,  
communities,  
and  
environments  
in Ramsey  
County



SAINT PAUL – RAMSEY COUNTY PUBLIC HEALTH

# Strategic Plan

2014 - 2018

# Letter from the Director

This plan will be used to guide decisions, allocate resources, monitor our progress and engage employees, county stakeholders and community members.

Dear Colleagues and Community Members,

I'm pleased to present the Saint Paul – Ramsey County Public Health Strategic Plan for 2014 – 2018. With this plan in place, we have a collective vision and a commitment to excellence across all goal areas.

I'm particularly proud of the way this plan was developed. Our planning process systematically considered many diverse sources of input, examining who we are, where we are and where we want to be. Participants were encouraged to think creatively in order to realize our vision for the future.

This plan does not highlight all of the work of our department. The scope of public health covers the entire community, including all ages and all concerns that impact the health of our population. We will continue to provide services as directed and funded by federal and state statute and as locally determined by the Ramsey County Board of Commissioners. The plan is, by design, high level and strategic in what we wish to accomplish in the next five years.

We know that the influence of the social determinants of health (education, employment, income, affordable housing, exposure to crime and violence, and the built environment) significantly impact the ability of people to be healthy. Our work in the community will place heavy emphasis on identifying health considerations in planning and policies developed related to social and economic systems, transportation, and the environment.

This plan will be used to guide decisions, allocate resources, monitor our progress and engage employees, county stakeholders and community members. As diligent stewards of the public's trust and funding, we will wisely manage resources and continue to respond to diverse community needs; we will do so in a transparent, cost-effective manner based on science, epidemiology and best practices.

By adhering to our core values, addressing critical issues, continually evaluating progress, and adapting to change, we will move toward achieving critical public health goals. As a leader in the community, we recognize that the public health system cannot do its work alone and needs the participation of a wide range of partners to be successful.

We thank the many individuals who contributed to this strategic plan, and those who will join us as we move toward the vision of healthy people, communities, and environments in Ramsey County. We are prepared to implement our plan with confidence, courage and a commitment to action to transform the health of our community.

Sincerely,



Marina McManus, Director

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Other planning documents available at [www.healthynamsey.org](http://www.healthynamsey.org)

May 2014

# Introduction

The strategic plan provides guidance on department priorities and policies, cross-functional activities, community partnerships and resource allocation.

## Strategic Planning Overview

Established in 1849, Ramsey County is home to 508,640 residents and is the most densely populated and racially diverse county in Minnesota. The city of Saint Paul, the county seat and capital of Minnesota, is one of 19 cities located within the county. (See Appendix A.)

Saint Paul-Ramsey County Public Health (SPRCPH) has a vital role to play in improving health outcomes for people in the county as outlined in MN Statute 145.A. The department establishes local public health priorities and determines the mechanisms to achieve those priorities and the statewide outcomes in Healthy Minnesota 2020 by addressing direct causes of preventable disease, disability and early death, as well as the range of personal, social, economic, and environmental factors that influence health status. SPRCPH programs, services and strategic planning efforts are consistent with the 10 Essential Public Health Services and the National Public Health Performance Standards. (See Appendix B.)

Creating a unified vision and a framework for action and sustained change, the SPRCPH five-year strategic plan outlines key health priorities affecting county residents, as well as related public health leadership and performance expectations. Emerging from a deliberate decision-making process that resulted in a shared mission, vision, values, goals and objectives, the strategic plan provides guidance on department priorities and policies, cross-functional activities, community partnerships and resource allocation.

The planning process focused on evidence-based decision making, committed to a health-in-all-policies approach, and involved the full range of stakeholders affected by the department's efforts. The plan's strategic priorities are:

- Health Equity
- Improved Health and Environmental Outcomes
- Adaptive Approaches to Climate Change
- Public Health Leadership
- Infrastructure for Excellence

Guided by the Department Leadership Team (DLT), the SPRCPH strategic planning process included substantial input from department staff, elected officials, key county stakeholders, and the community. Pertinent comments from the county manager, elected county officials and a cross-section of department directors strengthened the plan and aligned public health planning with Ramsey County operating principles and goals.

# Introduction

The DLT gathered and evaluated data, and developed plan elements, during 15 meetings from July 2013 through April 2014. Over the next five years, the DLT will monitor progress to ensure that the department is on track to meet the measurable objectives across the five priority goals, and will update the plan based on emerging or changing conditions. The strategic plan is aligned with other assessment, planning and evaluation work, including the Community Health Improvement Plan (CHIP), SPRCPH quality improvement (QI) plan, and department operational/work plans. (See Appendix C.)

As it implements the plan, SPRCPH will initiate action and respond to change with resiliency and strong leadership that advances work on strategic priorities in a deliberate and cost-effective manner. SPRCPH employees, county officials and community partners will be instrumental to the success of this plan. Department staff will be engaged in the development of new competencies to further strategic plan goals. The County Board of Commissioners and the Community Health Services Advisory Committee will be kept apprised of progress on a regular basis. And we will continue to rely on the strong public health network established through our ongoing work with valued and committed community partners.

In summary, the SPRCPH strategic plan will guide strategic decisions to deliver measurable benefits to the department, and most importantly, to communities across Ramsey County.

## Planning Context

While health indicators are the primary drivers of SPRCPH strategic priorities, external forces play a prime role in determining the plan's priority goals and objectives. Over the next few years, the department will deal with challenges related to health equity, access to health care, and increased volume and complexity of health information available for decision-making. The rapidly changing environment will require innovative and nimble approaches to policy intervention, interdisciplinary work and community engagement.

Health must be understood in relation to the social and physical environment that surrounds us. As noted in Ramsey County's Community Health Improvement Plan (CHIP), the county has the highest percentage of residents living in poverty among all Twin Cities metro area counties. A staggering 36% of all children in Saint Paul live in poverty compared to 15% of Minnesota children. Many residents have limited access to health care and other community resources that support healthy choices and healthy living.

In response, Ramsey County has recently embarked on an economic prosperity initiative aimed at combating areas of concentrated financial poverty in the county. SPRCPH will be a strong partner in this initiative because improving the overall social and economic status of Ramsey County residents will lead to improved health for residents.

The department values community partnerships recognizing that the greatest accomplishments occur when working with others to achieve population health goals. SPRCPH will continue to listen to and engage diverse communities, and proactively identify new partners to achieve these strategic goals.



# Strategic Framework

As part of its strategic planning process, the Department Leadership Team, with input from employees and key stakeholders, developed a new vision, mission and values.

## Vision

Healthy people, communities, and environments in Ramsey County

## Mission

Protect and improve the health of people and the environment in Ramsey County

## Values

### Accountability

As diligent stewards of the public's trust and funding, we wisely manage resources and address community needs in a transparent, cost-effective manner based on science, epidemiology and best practices.

### Equity

We believe all people have the right to live safe, healthy and productive lives using the concept of social justice as our guide. We are advocates for those who are systematically disadvantaged and work to vigorously address the determinants of health throughout the lifespan.

### Innovation

Using data to direct new approaches, we apply ingenuity and creativity to our work while encouraging risk-taking and learning.

### Leadership

We serve as the primary voice in our community for the protection and promotion of health and the environment. We are prepared to respond to critical emerging health needs of our residents.

### Partnership

We mobilize and cherish community partnerships recognizing that the greatest accomplishments occur when working with others to achieve population health goals.

### Prevention

We embrace prevention as a core principle in all our work. We act to reduce injury, illness and premature death; reduce environmental harm; and wisely manage resources.

### Respect

We treat the earth and all people with esteem, dignity and compassion. We inform and educate the public and provide services that are responsive, ethical and inclusive.

### Supportive Work Environment

We support collaboration, recognize contributions and promote leadership among our employees. We support, whenever possible, balance between employee work and personal lives. We are strongly committed to achieving a diverse workforce.

# Strategic Framework



## Strategic Priorities

Using principles of strategic thinking to develop the plan's key focus areas, the Department Leadership Team made conscious choices about how to use department resources to achieve a strategic purpose in response to a dynamic environment.

The strategic priorities include:

- Health Equity
- Improved Health and Environmental Outcomes
- Adaptive Approaches to Climate Change
- Public Health Leadership
- Infrastructure for Excellence

# Goals and Objectives

To guide its strategic focus through 2018, the department established five overarching goals with related objectives. The goals capture priority needs and/or opportunities that were identified during the data-gathering phase, and use the best available evidence for making informed public health practice decisions. (See Appendix D for a summary of key data trends related to each goal area.)

The SPRCPH strategic plan is not intended to be comprehensive of all programs or functions carried out by the department. Nevertheless, all areas of SPRCPH will contribute in defined ways to achieving the plan's goals and objectives, and the department will continue to carry out mandated and other critical ongoing public health programs and services.

**Goal 1:**  
Advance health equity – the attainment of the highest level of health possible – for people of all ages and backgrounds in Ramsey County.

## Objectives

1. Increase knowledge by at least 10% above baseline for all department staff of health inequities, the effects on the public's health, and relevance to their job roles and responsibilities, by July 1, 2016.
2. Create and implement an organizational framework within the department to ensure a focused approach to health equity, by December 31, 2015.
3. Identify one health disparity with a concentrated department-wide focus every two years beginning December 31, 2014.
4. Establish annually a clear policy and advocacy agenda for the department to advance health equity and address structural racism, beginning July 30, 2014.
5. Identify and implement up to three department strategies that promote economic prosperity in Ramsey County, by December 31, 2015.

**Goal 2:**  
Improve the health and safety of people of all ages and backgrounds and the environment in Ramsey County.

## Objectives

1. Increase knowledge by at least 10% above baseline for department staff of the current research related to (1) adverse childhood experiences and (2) violence, including the effects on the public's health and relevance to their job roles and responsibilities, by December 31, 2017.
2. Create and implement at least one joint strategy to improve evidence-based clinical preventive services with each Ramsey County-funded community clinic, by December 31, 2017.
3. Advocate for at least three public policy initiatives designed to improve health outcomes for residents in Ramsey County, on an annual basis beginning July 30, 2014.
4. Identify and implement at least one department-wide strategy to address one targeted health issue of concern, by December 31, 2016.



# Goals and Objectives

Goal 3:  
Promote adaptive approaches to public health impacts of a changing climate.

## Objectives

1. Increase knowledge by at least 10% above baseline for department staff of how the climate is changing, the effects on the public's health, and their job roles and responsibilities in promoting adaptations to climate change, by December 15, 2015.
2. Complete a vulnerability and risk assessment of the public health impacts associated with climate change, every two years beginning June 30, 2015.
3. Develop up to three department-specific priority climate change adaptation actions, including actions to improve department capacity to assess and build resilience to climate change risks, by December 31, 2015.

Goal 4:  
Demonstrate strong leadership by identifying, articulating and addressing Ramsey County's public health priorities.

## Objectives

1. Develop an internal framework that supports a timely response to current and emerging public health and policy issues, by December 31, 2014.
2. Create and communicate an annual public policy agenda that reflects a "health in all policies" commitment, beginning December 31, 2015.
3. Convene community members to address at least one priority public health issue facing Ramsey County residents, on an annual basis beginning December 31, 2014.
4. Create and implement a communication plan promoting departmental goals and priorities, and the value of public health in people's lives, by October 31, 2015.

Goal 5:  
Strengthen the department's infrastructure to support a culture of excellence.

## Objectives

1. Achieve and maintain national accreditation through the Public Health Accreditation Board that drives the continuous improvement of department programs and services, by June 30, 2015.
2. Create and implement a comprehensive workforce development plan that addresses training needs of the staff and the development of core public health competencies, by October 1, 2015.
3. Create and implement a Performance Management System that enhances the effectiveness, efficiency and quality of programs and services, by December 15, 2014.

# Strategic Planning Process

The SPRCPH strategic planning process featured four distinct phases: 1) Groundwork and Visioning, 2) Data Gathering and Review, 3) Goals and Objectives Development, and 4) Plan Monitoring and Performance. The graphic below explains the four phases.



Throughout the planning phases, special emphasis was placed on two-way communication with all employees and other stakeholders about the strategic planning process. Communication updates were part of each planning meeting agenda. The attention to communication ensured that:

- Stakeholders received continuous communication about the development of the department strategic plan during the course of the entire process;
- Stakeholders provided input into the development of the plan;
- A variety of methods and tools were used to maximize communication with stakeholders, and
- Communications incorporated the plan's key messages.

# Strategic Planning Process

## Phase One : Groundwork and Visioning

### Laying the Groundwork

The strategic planning process was guided and led by the SPRCPH Department Leadership Team with ongoing support from executive leadership, planners and a consultant. (See Appendix E for a list of strategic planning team members.)

The purpose of SPRCPH strategic planning was to determine future direction based on key data drivers, the environment and the needs of the community and department employees. The process stimulated critical thinking, and concentrated on what was important to the organization's long-term success. The intent was to foster energy and commitment among employees and other stakeholders to the fundamental priorities essential to the mission. In addition to defining team expectations, the planning purpose, process and products were affirmed by the Department Leadership Team.

### Articulating a Vision

The Department Leadership Team created a new department vision, mission and guiding principles. The draft version was sent to all employees for comment and was subsequently revised, based on feedback from staff. The SPRCPH mission, vision and values served as key drivers for the goals and objectives and will be posted on the department website.

## Phase Two: Data Gathering and Review

Both quantitative and qualitative data sources were used to inform the SPRCPH strategic plan. Collectively, the Department Leadership Team discussed the value of data sources, noted current and emerging trends and collected additional data as part of the environmental scan. The following is a snapshot of the data drivers and elements of the internal and external environmental scans.

### A. Data Drivers

Internal and external data sources were included in this planning phase. These data drivers are described in detail in Appendix F.

#### External Data Drivers

- Healthy People 2020
- National Prevention Strategy
- Healthy Minnesota 2020
- Ramsey County Community Health Assessment
- Ramsey County Community Health Improvement Plan (CHIP)

#### Internal Data Drivers

- Ramsey County Critical Success Indicators – Performance Measures
- SPRCPH Organizational Assessment
- SPRCPH Performance Management Assessment
- SPRCPH Quality Improvement Survey Results.
- SPRCPH Cultural Care Connection Survey Results

# Strategic Planning Process

## B. Environmental Scans

Committed to an inclusive planning process, the Department Leadership Team reached out to key internal and external stakeholders to help identify needs and priority issues. These stakeholders will also be instrumental in advancing the plan's goals and objectives. The environmental scans included a community health concerns survey, employee survey, stakeholder interviews, and policymaker surveys and facilitated discussions. (See Appendix G for themes from these scans.) Specific scans included:

### Ramsey County Community Health Concerns Survey

In March and April of 2013, Saint Paul – Ramsey County Public Health conducted a survey of individuals who live or work in Ramsey County. Nearly 3,100 people completed online and paper surveys. The survey asked for the public's opinions on a wide range of community health issues such as alcohol and tobacco use, access to medical and dental services, infectious diseases, the health of babies and children, and the environment.

The survey instrument, developed in collaboration with other east metro counties, asked respondents to indicate their level of concern for 94 community health topics. In an effort to be more inclusive and increase participation in the survey, Saint Paul - Ramsey County Public Health formed a community outreach team. Team members were recruited from department staff based on experience working with a particular demographic in Ramsey County, self-identification in a particular cultural group, and linguistic diversity. Members of the outreach team were assigned specific demographic groups in Ramsey County to help facilitate survey completion, either referring people to the web-based survey or providing assistance with filling out the paper survey.

Even though the results cannot be generalized to all residents and people who work in Ramsey County, it is a large and comprehensive survey and there are key components that make the results useful for understanding community health concerns.

### Survey - SPRCPH Employees

In October 2013, the Department Leadership Team conducted an electronic survey of 300 public health staff, soliciting their opinions about department strengths, the most important health-related issues facing the county, opportunities on which the department should focus its efforts, how the department can better reach diverse populations and build relationships within the community, and what could be changed to improve client services. Fifty-two percent of employees returned the survey.

### Stakeholder Interviews - Ramsey County Departments

In November and December of 2013, members of the planning team gathered input from directors of other county departments, including the county manager, attorney's office, human services, public works, parks and recreation, community corrections, emergency management, sheriff's office, library, veteran services, and workforce solutions. Because public health programs often intersect with the work of these county departments, the questions asked pertained to the most important health-related issues facing the county and the strengths of the public health department, and also elicited suggestions for how to enhance working relationships and the collective ability to achieve mutual goals.

### Survey - Community Health Services Advisory Committee (CHSAC)

In December 2013, the Community Health Advisory Committee was invited to participate in an electronic survey that paralleled the employee survey. Committee members were asked for input regarding critical health issues, important opportunities, department strengths, and suggestions for improvement.



# Strategic Planning Process

## Facilitated Discussion - Ramsey County Board of Commissioners

In January of 2014, the Ramsey County Board of Commissioners engaged in a facilitated discussion about their thoughts related to public health priorities in the next five years. Interaction focused on the most critical health-related issues and problems facing the county, and also included comments about the strengths of the department, opportunities for reaching diverse populations, and key priorities for SPRCPH efforts.

## Phase Three: Goals and Objectives Development

The Department Leadership Team created goals and objectives that are clear, strategic, measurable, realistic and achievable within the next five years.

In moving from data analysis to design of goals and objectives, the Department Leadership Team generated a list of internal and external issues, completed a SOAR analysis, and prioritized department aspirations.

### **SOAR (Strengths, Opportunities, Aspirations, Results)**

SOAR is a strategic planning framework that focuses on Strengths, Opportunities, Aspirations and Results. The framework uses the language and philosophy of appreciative inquiry and applies it to the strategic thinking and dialogue process. A positive approach to strategic planning, SOAR doesn't ignore weakness and threats but intentionally reframes them in a positive context. Use of the SOAR process affirmed the department's commitment to possibility, rather than deficit thinking.

Using the principles of focused conversation, the Department Leadership Team brainstormed internal and external strengths, opportunities and aspirations and results. (See Appendix H.) Following a dialogue about the SOAR results, the Department Leadership Team then prioritized the internal and external aspirations, selected strategic issues and moved on to shaping the plan goals.

### **Setting Goals and Objectives**

Encompassing external and internal issues, the goals address broad and fundamental elements of success. When designing objectives, the Department Leadership Team identified strategic questions for each goal, deliberated "from – to" gaps, and screened objectives for SMART criteria. An objective was deemed strategic if it:

- Represented "breaking new ground" – doing something new or something that has been done before but in a new or innovative way, or
- Capitalized on what is going on in the world now (and for the next five years) and was viewed as timely, or providing an opportunity to have a greater-than-usual ability to positively impact the health of Ramsey County.

SPRCPH will address specific priorities as part of its collaborative contribution to implementing the Community Health Improvement Plan (CHIP). (See Appendix I.)

In summary, the Department Leadership Team created goals and objectives that are clear, strategic, measurable, realistic and achievable within the next five years. It also looked deeply at the department leadership and performance required to produce results.

# Strategic Planning Process

## Phase Four: Plan Monitoring and Performance

### Monitoring

The strategic plan is a living document that will be reviewed and updated at least annually to reflect additional priority areas that may be identified as part of the department's commitment to continuous improvement and to ensuring that public health needs within the county are met.

The plan also may be revised based on work completed, adjustments to timelines, or changes in available resources. An annual report showing progress towards the goals and objectives, and how targets are monitored, will be prepared. The Department Leadership Team is responsible for updating the plan and for communicating updates to the County Board of Commissioners, the Community Health Services Advisory Committee (CHSAC), department staff and the public.

### Methodology

To assure that the goals and objectives of the strategic plan work plan are being met in the designated timeframes, the following activities will take place:

Action Steps What will be done?	Methods How will it be done?	Timeline By When?
Finalize strategies within each goal area	<p>Cross-cutting teams, led by DLT members, will be created around each goal</p> <p>Teams will review the lists of strategies developed as part of the strategic planning process and revise or expand as needed</p>	<p>July 2014</p> <p>July 2014 (ongoing)</p>
Track progress towards goals and objectives	<p>Create a system for tracking department efforts aimed at achieving strategic plan goals and objectives and house on the department's SharePoint site</p> <p>Establish a standing item on DLT meeting agendas for regular review of progress</p>	<p>July 2014</p> <p>Quarterly (beginning July 2014)</p>
Communicate progress towards goals and objectives to external and internal stakeholders	<p>Report annually to the County Board, the CHSAC, the public and department staff</p> <p><i>Note: Goal 4, Objective 4, directly relates to the creation and implementation of a communication plan</i></p>	<p>Annually (beginning March 2015)</p>

# Strategic Planning Process

Action Steps What will be done?	Methods How will it be done?	Timeline By When?
Review and update plan	<p>Review work underway throughout the department (through implementation of a performance management system) and identify need for new or revised strategies to achieve plan objectives</p> <p>Solicit input from the County Board regarding current trends and emerging issues that may suggest changes to the plan</p> <p>Solicit input from the CHSAC regarding changes in the community that may suggest changes to the plan</p> <p>Review program-specific customer satisfaction feedback as one source of information that may suggest changes to the plan</p> <p>Solicit input from department staff regarding internal issues that may suggest changes to the plan (as part of annual all-staff QI survey)</p>	<p>Quarterly (beginning July 2014)</p> <p>Annually (beginning January 2015)</p> <p>Annually (beginning January 2015)</p> <p>Periodic (multiple sources of customer satisfaction data available across the department)</p> <p>Annually (beginning June 2014)</p>
Ensure connection with CHIP implementation	<p>Department staff assigned to each CHIP action team will provide a report of activities and progress to the DLT every six months</p> <p>Department director will serve as liaison between CHSAC and DLT regarding CHIP and strategic plan updates as needed</p> <p><i>Note:</i> Goal 4, Objective 3, directly relates to the CHIP action teams</p>	<p>Twice per year (beginning December 2014)</p> <p>As needed</p>

# Strategic Planning Process

Action Steps What will be done?	Methods How will it be done?	Timeline By When?
Ensure connection with the department Quality Improvement (QI) plan	At least one member of DLT will serve on the department Quality Improvement Leadership Team (QILT) at all times	Ongoing
	QILT will update the DLT on the status of QI efforts throughout the department and other QI plan activities	Quarterly (beginning April 2014)
	The DLT will approve the QI plan on an annual basis	Annually
	QILT will provide DLT with a year-end summary of accomplishments on an annual basis	Annually (beginning December 2014)
	<i>Note: Goal 5 contains objectives specific to QI</i>	

## Quality Improvement

When thinking strategically about the priorities for the department over the next five years, SPRCPH recognized the importance of a culture of quality, as demonstrated through the creation of Goal 5 (Strengthen the department’s infrastructure to support a culture of excellence) which has quality, performance and continuous improvement embedded within its three objectives.

## Looking to the Future

The department’s commitment to quality and the specific activities outlined in its quality improvement plan ensure that the strategic plan is implemented in the context of a sound performance-management infrastructure that integrates quality improvement components into staff training, organizational functioning, programs, services, processes and outcomes. The strategic plan provides direction on what the department will achieve, serves as a guide for making decisions and allocating resources effectively, and focuses the entire department on strategic initiatives to improve the health of Ramsey County.



## Appendix A - Ramsey County Overview

Ramsey County, Minnesota, was established by the territorial legislature of Minnesota in 1849, nine years before Minnesota became a state and was named for Alexander Ramsey, the first governor of the Minnesota territory. Ramsey County is located at the bend of the Mississippi River, which forms a portion of its southern border. The city of Saint Paul, the County seat and the capital of Minnesota, is one of 19 cities located in the county's borders. The county encompasses 207 square miles with 81 lakes and numerous parks and multi-use trails.

Ramsey County is the corporate headquarters to four Fortune 500 companies. Major employers include 3M, Land O' Lakes, Ecolab, St. Jude Medical, Securian Financial Group, Traveler's Insurance, the State of Minnesota, and HealthEast Care System. The county is also a regional hub for state government, nonprofits, higher education, the arts, health care, multicultural organizations, communications, and transportation. The transportation infrastructure of the region continues to expand with the renovation and re-opening of the Union Depot as a multi-modal transit hub, and the construction of the Central Corridor light rail line which has been identified as a project of national and regional significance. The Saint Paul Port Authority operates three barge facilities in the region, which account for a majority of the 5.5 million tons of commodities that passed thru the Twin Cities river terminals in 2013.

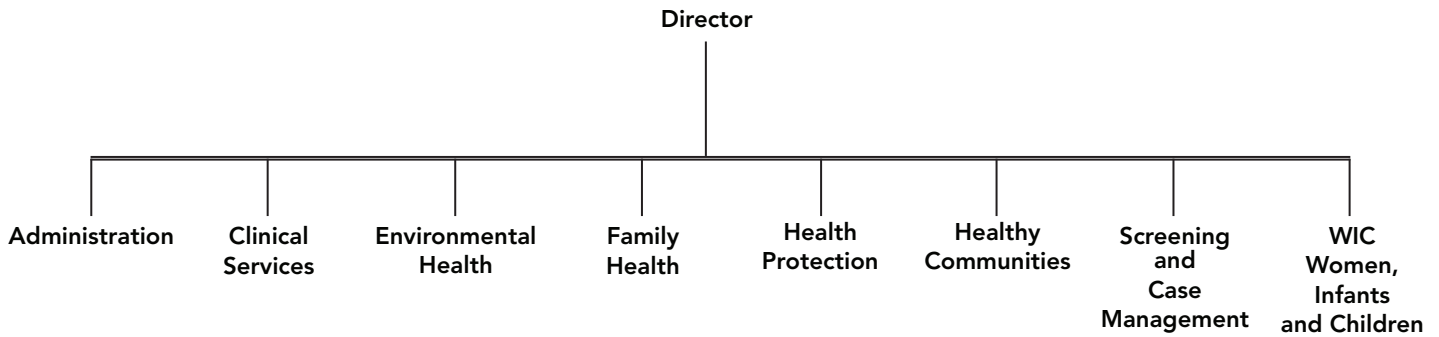
Higher education institutions that call Ramsey County home include 15 public and private colleges and universities and post-secondary institutions. Many are located in Saint Paul, which is second in the U.S. in the number of higher education institutions per capita. There are 20 public libraries located in the county operated by the City of Saint Paul, and Ramsey County. The county is headquarters to American Public Media, the national's second largest producer and distributor of national public radio programs. American Public Media is the parent company of Minnesota Public Radio, a 43-station radio network that serves a regional population of 5 million people.

The county has seven hospitals within its boundaries including Regions Hospital, a Level I Trauma Center for adults and children. The county is also headquarters for HealthEast Care System, a non-profit health care system that operates four hospitals, 14 clinics, medical transportation and a variety of other outpatient services. Other health systems with hospitals or clinics within the county are HealthPartners, Allina Health, Children's Hospitals and Clinics of Minnesota, and Fairview Health System. There are five community health clinics that provide medical, dental and mental health services to low-income, uninsured and under-insured residents: Face-to-Face Health and Counseling Service, Inc., Family Tree, Open Cities Health Center, West Side Community Health Services, and United Family Medicine. Three of these (Open Cities Health Center, United Family Medicine, and West Side Community Health Services) are federally qualified health centers (FQHCs). St. Jude Medical, 3M and Boston Scientific are manufacturers of medical devices and products located in the county.

The county has an abundance of popular recreational, cultural attractions, and venues including the Minnesota State Fair, Xcel Energy Center, the Ordway Center for the Performing Arts, the Science Museum, the Children's Museum, the Minnesota History Center, the Landmark Center and the Saint Paul Winter Carnival. Nationally recognized arts organizations based in the county include the Saint Paul Chamber Orchestra, "A Prairie Home Companion" and the Penumbra Theater Company. The area is home to a vibrant music scene and a large concentration of live/work space for studio artists.

The county has a well-developed system of local and regional multi-use trails, parks, and recreational facilities. In addition to numerous parks and open spaces maintained by cities, Ramsey County operates 15 county and regional parks and five trail corridors. Recreational facilities include the Guidant John Rose Oval in Roseville, the largest outdoor skating rink in the world, and venue for national and international competitions. The area hosts a number of professional, semi-professional, and amateur sports teams including The Minnesota Wild, the Minnesota Swarm, and the Saint Paul Saints.

# Appendix B - SPRCPH Organizational Chart and Services



## Administration

Birth, Death and other Vital Records; Budgeting, Accounting, Procurement, and Payroll Services; Facilities Management; Information Services Technical Support & Coordination; Health Information Systems and Privacy Compliance; Employee Health and Safety; Health Laboratory; HouseCalls; Community Health Assessment, Data Analysis, Planning and Evaluation.

## Clinical Services

Sexual Health, Tuberculosis, and Immunization Services; Perinatal Hepatitis B Prevention; Refugee Screening; SOS Sexual Violence Services; Correctional Health Services provided to incarcerated individuals at the Ramsey County Correctional Facility (RCCF), Juvenile Detention Center (JDC), Boys Totem Town (BTT) and the Adult Detention Center (ADC).

## Environmental Health

Resource Recovery Project management; Policy development, evaluation, and planning of Waste Reduction, Recycling, and Solid and Hazardous Waste issues; Education, promotion and assistance to households and businesses on environmental health issues; Delegated MDH licensing and inspections of Food and Lodging, Manufactured Home Parks, Public Swimming Pools, Radon Detection, Public Health Nuisance Control; Solid and Hazardous Waste Compliance: Solid Waste Haulers and Hazardous Waste Generators.

## Family Health

Targeted Home Visiting Services for Pregnant and Parenting Families At-Risk, including Refugees and Immigrants, Teen Parents, and Children with Special Health Care Needs; Assessment and Case Management for Teen Parents on Minnesota Family Investment Program (MFIP); Childhood Asthma Management; Child and Teen Checkups Outreach; Childhood Lead Poisoning Prevention; Early Intervention for children birth to five.

## Health Protection

Public Health Emergency Response Planning, Training and Exercise, Response and Recovery Capabilities Evaluation; Medical Reserve Corps Management; Communicable Disease Surveillance, Investigation and Control.

## Healthy Communities

Chronic Disease Prevention (Statewide Health Improvement Program – SHIP); Family and Community Violence Prevention; Adolescent Health Promotion/Teen Pregnancy Prevention; Hmong Community Health Promotion.

## Screening and Case Management

Long Term Care Consultations; Personal Care Assistance Assessments; Screening & Case Management Services – persons with disabilities: Alternative Care, Community Alternatives for Disabled Individuals (CADi), Community Alternative Care (CAC), Elderly Waiver (EW), and Traumatic Brain Injury (TBI) Waivers.

## WIC (Women, Infants and Children)

Nutrition Assessment and Education; Health Screenings; Referrals and Vouchers for supplemental nutritious foods for pregnant and breastfeeding women, women who have recently given birth, infants and children up to age five.

# Appendix C - Linkages between Strategic Planning, Community Health Improvement Planning and Quality Improvement

The agency's strategic plan (SP), community health improvement plan (CHIP), and quality improvement (QI) activities cross-reference one another and are linked in the following ways.

## Strategic Plan and Community Health Improvement Plan:

- Overlap between SP objectives and CHIP objectives;
- Staff commitment to CHIP action teams highlighted in the SP.

## Quality Improvement and Strategic Plan:

- Goal 5 of the SP addresses continuous improvement and performance management;
- QI will be used in evaluating/improving department programmatic work;
- The department QI plan informs and is informed by SP monitoring/evaluation efforts.

## Community Health Improvement Plan and Quality Improvement:

- QI will be used to help evaluate/and improve the work of CHIP action teams;
- The department QI plan informs and is informed by CHIP monitoring/and evaluation efforts.



## Appendix D - Key Data Trends

The following describes key external trends and factors, by goal area, that impact both community health and the public health department.

### GOAL AREA 1:

#### Health Equity

As noted earlier, SPRCPH has an organizational value related to health equity: We believe all people have the right to live safe, healthy and productive lives using the concept of social justice as our guide. We are advocates for those who are systematically disadvantaged and work to vigorously address the determinants of health throughout the lifespan.

“Health equity” means attaining the highest level of health possible for all people in Ramsey County. More than disparities or differences in health and safety outcomes, inequity describes unfairness and the systematic nature of disparities, including structural racism. Studies show that for certain populations in the county, there are persistent, significant, and socially determined differences in the conditions that create health and the opportunity to be healthy.

The Ramsey County Board adopted a goal for 2014-2015 aimed at cultivating economic prosperity and combating areas of financial poverty in the county. Public health staff are engaged in the process to review data, understand the framework being developed to describe prosperity, and reflect on how SPRCPH can better align work in support of this goal.

Ramsey County has the highest proportion of census tracts in the region identified as concentrated areas of financial poverty. Concentrated areas of financial poverty create challenges for people living within them and also impact broader economic growth and community connectivity. National research has shown that housing, education, employment and transit systems are among the factors enabling residents to prosper. However, local data suggest that there are a number of neighborhoods in Ramsey County disproportionately disconnected from regional job and activity centers, and that future job opportunities will target those who are well educated, adequately trained and connected.

Several key data points from the Ramsey County Community Health Assessment illustrate why health equity is a strategic priority:

- Ramsey County has more residents living in poverty than any other metro county;
- In Saint Paul Public schools, 72% of students qualify for free or reduced lunch;
- Children in Ramsey County are more likely to live in poverty than any other age group;
- Ramsey County has the lowest percentage of residents who have any education beyond high school in the metro area;
- Saint Paul has the lowest proportion of adults aged 16-64 years old who are working (68%) compared to other Ramsey County cities and Minnesota;
- During 2010, the percentage of black/African Americans who owned their homes in Ramsey County was three times less than whites.



# Appendix D - Key Data Trends

## GOAL AREA 2:

### Improved Health and Environmental Outcomes

Improving health, safety and environmental outcomes remain a critical focus for SPRCPH. Priorities within this goal are informed by all the wide range of data reviewed in the course of developing this strategic plan. These priorities may shift over time as emerging issues arise and new health assessment and environmental data are collected.

Because differences in health outcomes among populations in Ramsey County have been identified, SPRCPH will focus first on health disparities (the differences in health outcomes experienced by racial, ethnic or socioeconomic groups). Strategic emphasis has also been placed on adverse childhood experiences, violence prevention and clinical preventive services. These intersect with the Community Health Improvement Plan (CHIP)-identified priorities of social determinants of health; nutrition, weight and active living; access to health services; mental health/ mental disorders/ behavioral health; and violence prevention. SPRCPH staff will be serving on CHIP action teams to address these issues in partnership with the community.

The Minnesota Adverse Childhood Experiences (ACE) Study assessed associations between childhood maltreatment and later-life health and well-being. Findings suggest that certain experiences are major risk factors for the leading causes of chronic illness and death as well as poor quality of life. Progress in preventing and recovering from health and social problems is likely to benefit from understanding that many of these problems arise as a consequence of adverse childhood experiences.

Violence is a public health problem that has a substantial impact on individuals, their families and communities, and society. Each year, thousands of people in Ramsey County experience the physical, mental, and economic consequences of violence. SPRCPH is committed to continuing its leadership role and working in partnership in the community on violence prevention.

Access to clinical preventive services, such as routine disease screening and scheduled immunizations, is key to reducing death and disability and improving health. These services both prevent and detect illnesses and diseases in their earlier, more treatable stages, significantly reducing the risk of illness, disability, early death, and medical care costs. The Affordable Care Act will significantly change this landscape and monitoring will be important to measure the impact on the community and focus aid on the gaps.

Several key data points from the Ramsey County Community Health Assessment illustrate why improved health and environmental outcomes is a strategic priority:

- More than half of Minnesotans have had an adverse experience in their childhood that could have life-long impact on their mental health and well-being according to a 2011 study by the Minnesota Department of Health.
- Since 2008, Ramsey County's serious crime rate (aggravated assault, murder, rape, and robbery) remains the highest in the 7-county metro area.

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## Appendix D - Key Data Trends

### GOAL AREA 2:

#### Improved Health and Environmental Outcomes

(continued)

- In 2012, Ramsey County had a higher age-adjusted rate of battering and maltreatment injuries requiring treatment in an emergency department or hospital than the rest of the metro area or state. Court issued orders for protection because of domestic violence were close to 2000 in 2013, rising steadily since 2010. The number of child protection assessments has been steadily rising in Ramsey County since 2007.
- Infant mortality has long been known to be the best single measure of the health of a population, group or community. Black/African American infants in Ramsey County are 2.5 times more likely to die before their first birthday than white infants.
- According to birth certificate data, no or late first-trimester prenatal care is two to five times higher in Ramsey County among populations of color and American Indians compared to white women. White mothers have the highest rate of first-trimester prenatal care and is the only group currently meeting the Healthy People 2020 goal.

### GOAL AREA 3:

#### Adaptive Approaches to Climate Change

Disease occurrence is linked to climate. As the climate changes, adverse impacts to public health and the environment will occur. For example, warmer weather and precipitation changes are associated with the increase in West Nile virus. Extreme weather events impacting Minnesota such as heat waves and severe droughts will trigger heat stress, heat-related illness in vulnerable populations and scarcity of safe food and water. Long-range change in temperature and precipitation may result in increased respiratory illness, increased allergic reactions in response to environmental triggers such as pollen and mold, insect-borne infectious disease, and food- and waterborne disease. Short-term impacts include injury and death due to exposure to extreme weather, and mental and emotional stress in response to experiencing extreme weather-related emergencies.

Current approaches to climate change differentiate between mitigation and adaptation. Mitigation approaches are actions taken to reduce or ameliorate the causes of climate change, such as greenhouse gas emissions; adaptive approaches are actions taken to prepare for and respond to the effects of climate change. In Minnesota, efforts to slow down the rate of climate change include legislation that sets targets for reduction of greenhouse gas emissions, and statewide efforts to address greenhouse gas emissions in a comprehensive way through the Minnesota Climate Advisory Groups (MCAG) process. The Ramsey County Board has adopted a County Energy Management and Stewardship plan, which guides policy and activities around energy with an eye toward mitigation, such as: projects to ensure the energy efficiency of county-owned buildings, energy-efficient design in new and renovated buildings, fleet management, and local level policy initiatives aimed at conserving energy use and reducing emissions.

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# Appendix D - Key Data Trends

## GOAL AREA 3:

### Adaptive Approaches to Climate Change

(continued)

Risk communication to vulnerable populations in Ramsey County in advance of extreme weather events so they may be better prepared is one example of a public health adaptive approach to climate change. Other approaches include working with communities to build resiliency by developing awareness of those most at risk in extreme weather events, announcing ozone action days in response to high levels of air pollution, and educating businesses and residents about how to keep food and drinking water safe during flooding.

Local public health also has a role in collecting data, conducting surveillance on community health concerns, and tracking trends in environmental risk, health outcomes, and population vulnerability to specific climatic events. Vulnerability assessments can ensure that climate-related trends are incorporated into broader planning processes, and that interventions designed to address climate change do not further exacerbate existing health disparities in the community. Vulnerable populations at increased health risk from climate change include children, elderly people, those living in poverty, people with underlying health conditions, and people living in certain geographic areas.

The Building Resilience Against Climate Effects (BRACE) framework was developed by the Centers for Disease Control and Prevention (CDC) to support health departments in developing their climate change planning and response activities. The framework entails:

- Forecasting and assessing (identify the scope of the most likely climate impacts, the potential health outcomes associated with those climatic changes, and the populations and locations vulnerable to these health impacts);
- Projecting the disease burden (estimate or quantify the additional burden of health outcomes due to climate change);
- Assessing interventions (identify the most suitable interventions for the health impacts of greatest concern);
- Creating the plan (develop and implement a health adaptation plan for climate change that addresses health impacts, identifies gaps in critical public health functions/services, and provides guidance for enhancing adaptive capacity); and
- Evaluating (evaluate the process and improve the quality of activities undertaken).

## Appendix D - Key Data Trends

### GOAL AREA 4:

#### Public Health Leadership

Local public health has had a long-standing leadership role in identifying and addressing the health needs of the community since the appointment of the first health officer in 1854. Remaining constant through the years, the governmental role and responsibility for protecting and promoting the health of our population has been a hallmark of our agency. We have been accountable by our focus on prevention, identification of emerging issues, advocacy for public health policy, providing health care for those in need, community engagement and organizing, and the use of science-based and best practices in the design of programs and services.

The community organizations and leaders that have knowledge about the work of our department reach out to us to locate comprehensive or specific health data, request participation on task forces and committees on a wide variety of topics, determine the public health perspective on policy issues, ask for our support of their efforts, make referrals for clients and recognize the value of a public health voice and approach in the discussion of community issues. In recent years, both state and local public health leaders have become more proactive in specifically identifying and promoting the value and return on investment of public health programs.

We know that 80% of our health status is based on factors other than medical care – 30% health behaviors (tobacco use, diet and exercise, alcohol use, unsafe sex), 40% social and economic factors (education, employment, income, family/social support, community safety), and 10% physical environment (environmental quality and built environment).

While we will continue to engage in this foundational work, we also recognize the environment is changing. Health system reform, for example, offers new opportunities for local public health. We look forward to applying our demonstrated experience, expertise and leadership in solving current and emerging challenges.

A strong history of working with others in the community positions us well to identify and respond to unique local needs. With an eye to the future, we bring a strong commitment to working with new partners towards improved health of Ramsey County.

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# Appendix D - Key Data Trends

## GOAL AREA 4:

### Public Health Leadership

(continued)

According to a SPRCPH organizational assessment, the department has strength in the following skills which can serve as a foundation for work in this area, including:

- Serving as a primary and expert resource for establishing and maintaining public health policies, practices, and capacity;
- Monitoring and tracking public health issues that are being discussed by individuals and entities that set public health policies and practices;
- Engaging in activities that contribute to the development and/or modification of public health policy;
- Promoting the community's understanding of and support for policies and strategies that will improve the public's health;
- Providing health education and health promotion policies, programs, processes, and interventions to support prevention and wellness;
- Engaging with the public health system and the community in identifying and addressing public health problems through collaborative processes;
- Providing information on public health issues and public health functions through multiple methods to a variety of audiences.

In addition, stakeholders interviewed for strategic planning said that SPRCPH has “trust with the community,” and cited many examples. A result of this community trust can be many productive partnerships that result in effective change.

# Appendix D - Key Data Trends

## GOAL AREA 5:

### Infrastructure for Excellence

SPRCPH has conducted or coordinated several initiatives to form a foundation for an infrastructure of excellence. These efforts resulted in the following guidance documents: Ramsey County Community Health Assessment, Ramsey County Community Health Improvement Plan, SPRCPH Strategic Plan, and a SPRCPH Quality Improvement Plan.

The department collaborated with over 80 community partners to develop a Community Health Assessment and a Community Health Improvement Plan (CHIP). SPRCPH and community partners will participate on CHIP action teams to implement the plan. The department periodically develops a strategic plan and a quality improvement plan. These plans provide SPRCPH and its stakeholders with a clear picture of strategic priorities, a blueprint for addressing identified issues, a plan for monitoring progress, and a guide for focused quality improvement. These components lay the groundwork for an effective performance management system.

In order to establish a baseline related to the strengths and weaknesses of the department, several assessments were conducted, including a Quality Improvement Survey, an Organizational Assessment, and a Performance Management Assessment. The section below provides aggregated highlights related to these assessments.

#### Areas of department strength:

- Conducting and disseminating assessments focused on population health status and public health issues facing the community;
- Investigating health problems and environmental public health hazards to protect the community;
- Informing and educating about public health issues and functions;
- Engaging with the community to identify and address health problems.
- Using scientific guidelines;
- Staff consulting with and helping one another to solve problems.

#### Areas needing improvement:

- Evaluating and continuously improving health department processes, programs, and interventions;
- Coordinating efforts so that multiple programs use the same standards and targets when appropriate;
- Providing staff training related to health equity, performance standards and core competencies;
- Staff integrating Quality Improvement concepts and principles into daily practice.

# Appendix E - Strategic Planning Team Members

The Department Leadership Team (DLT) guided the SPRCPH strategic planning process and worked closely with department planners and an external consultant. DLT members include:

- **Joan Brandt**, Family Health Manager
- **Chris Burns**, Public Information Officer
- **Robert Einweck**, Health Protection Manager
- **Don Gault**, Healthy Communities Manager
- **Zack Hansen**, Environmental Health Director
- **Diane Haugen**, Clinical Services Manager
- **Diane Holmgren**, Administration Manager
- **Marina McManus**, Public Health Director
- **Mary Peick**, WIC Manager

The following SPRCPH staff and external consultant supported the DLT throughout the planning process:

- **Cheryl Armstrong**, Program Analyst
- **Sue Mitchell**, Public Health Program Supervisor
- **SuzAnn Stenso-Velo**, Planning Specialist
- **Pat Koppa**, President, Public Health Consultants, LLC

The SPRCPH Strategic Plan was developed with the involvement and oversight of County Manager Julie Kleinschmidt, the Ramsey County Board of Commissioners:

- **Toni Carter**, District 4 Commissioner
- **Blake Huffman**, District 1 Commissioner
- **Jim McDonough**, Chair, District 6 Commissioner
- **Mary Jo McGuire**, District 2 Commissioner
- **Rafael Ortega**, District 5 Commissioner
- **Janice Rettman**, District 3 Commissioner
- **Victoria Reinhardt**, District 7 Commissioner

and Saint Paul - Ramsey County Community Health Services Advisory Committee Members:

- |                             |                                 |                         |
|-----------------------------|---------------------------------|-------------------------|
| • <b>Maridee Bain</b>       | • <b>Ann Poole</b>              | • <b>Nancy Shier</b>    |
| • <b>Rose Brown</b>         | • <b>Colleen Quesnell</b>       | • <b>Jill Stewart</b>   |
| • <b>Kathryn Campion</b>    | • <b>Regina Rippel</b>          | • <b>Esther Tatley</b>  |
| • <b>Thomas Kottke</b>      | • <b>Sylvia Robinson</b>        | • <b>Bob Tracy</b>      |
| • <b>Liz McLoone-Dybvig</b> | • <b>Jack Rossbach</b>          | • <b>Mary Yackley</b>   |
| • <b>David Muhovich</b>     | • <b>Karla Sand</b>             | • <b>Mayblia Yansao</b> |
| • <b>Eugene Nichols</b>     | • <b>Kerri-Elizabeth Sawyer</b> |                         |

# Appendix F - External and Internal Data Drivers

## Healthy People 2020

Healthy People 2020 provides science-based, 10-year national objectives for improving the health of all Americans. Healthy People has established benchmarks and monitored progress over time in order to encourage collaborations, empower individuals toward making informed health decisions, and measure the impact of prevention activities.

## National Prevention Strategy

The National Prevention Strategy is a comprehensive plan that will help increase the number of Americans who are healthy at every stage of life. The National Prevention Strategy was developed by the National Prevention, Health Promotion, and Public Health Council.

## Healthy Minnesota 2020

This document features three themes that reflect the importance of social and economic determinants for health: capitalize on the opportunity to influence health in early childhood; assure that the opportunity for health is available everywhere and for everyone, and strengthen communities to create their own healthy futures. The emphasis is on creating conditions that allow people to be healthy, conditions that assure a healthy start and that set the stage for healthy choices throughout life.

## Ramsey County Community Health Assessment

Saint Paul-Ramsey County Public Health (SPRCPH) is charged with protecting, maintaining and improving the health of Ramsey County residents. SPRCPH fulfills this responsibility, in part, by collecting and analyzing health and related information that identifies health trends and concerns that can be addressed through public health interventions and strategic planning. A comprehensive community assessment is conducted every five years with updates as new information becomes available. Ramsey County's most recent assessment was modeled after Minnesota Department of Health's publication, The Health of Minnesota: Minnesota's Statewide Health Assessment, highlighting emerging trends in the population's health.

## Ramsey County Community Health Improvement Plan (CHIP)

The Ramsey County Community Health Improvement Planning Committee met seven times between April and November of 2013. They provided input on the Ramsey County Community Health Assessment, developed a vision, discussed data, prioritized issues and developed goals, objectives and strategies related to the priorities.

## Ramsey County Goals and Critical Success Indicators – Performance Measures

This is a group of indicators that SPRCPH tracks which align with the over-arching Ramsey County system goals.

## SPRCPH Organizational Assessment

Based on the Public Health Accreditation Board (PHAB) standards and measures, the Department Leadership Team (DLT) rated the department's performance and identified three areas to work on.

## SPRCPH Performance Management Assessment

As required by PHAB accreditation, SPRCPH DLT conducted a performance management assessment using a survey tool from the Turning Point Performance Management Collaborative that was electronically.

## SPRCPH Quality Improvement Survey Results

This survey of all staff was a first step to collect data on the current status of quality improvement work for a baseline measure and provide guidance to future efforts.

## SPRCPH Cultural Care Connection Survey Results

This survey of all staff assessed our level of service to our culturally and/or linguistically diverse clients and tried to identify needs and future strategies related to cultural challenges.

# Appendix G - Key Themes from Environmental Scans

As part of the data-gathering process, key internal and external stakeholders were asked to help identify community needs and priority issues for departmental focus in the coming years. Through a series of “environmental scans,” including surveys, interviews and facilitated discussions, input was gathered from a variety of audiences. Key themes from these scans are summarized below, by audience.

## **Ramsey County Community Health Concerns Survey**

In March and April of 2013, Saint Paul – Ramsey County Public Health conducted a survey of individuals who live or work in Ramsey County. Nearly 3,100 people completed online and paper surveys. The survey asked for the public’s opinions on 94 community health issues such as alcohol and tobacco use, access to medical and dental services, infectious diseases, the health of babies and children, and the environment.

In an effort to be more inclusive and increase participation in the survey, Saint Paul - Ramsey County Public Health formed a community outreach team. Team members were recruited based on experience working with a particular demographic in Ramsey County, self-identification in a particular cultural group, and linguistic diversity.

Key survey findings include:

- Distracted driving (such as cell-phone texting);
- Lack of health insurance;
- Poverty;
- Driving while under the influence of alcohol or drugs;
- Unemployment;
- Alcohol use by underage youth;
- Lack of quality housing that is affordable.

## **Saint Paul - Ramsey County Public Health (SPRCPH) Employee Survey**

In October 2013, the Department Leadership Team conducted an electronic survey of 300 public health staff, soliciting their opinion about the strengths of the department, the most important health-related issues facing the county, opportunities on which the department should focus its efforts, how the department can better reach diverse populations and build relationships within the community, and what could be changed to improve client services.

Fifty-two percent of employees returned the survey. SPRCPH employees identified the most critical health related issues facing the people of Ramsey County that need a response over the next five years (top 10 responses):

- Obesity;
- Lack of health care access;
- Housing and homelessness;
- Unhealthy environment;
- Infectious diseases;
- Mental health care access;
- Violence and safety;
- Access to health education;
- Chronic diseases;
- Poverty.



## Appendix G - Key Themes from Environmental Scans

SPRCPH employees identified the most important opportunities on which the department should focus its efforts over the next five years:

- Internal department issues (e.g., develop supervisory skills in department management, improve internal communications, implement electronic health records, increase and value staff input in decisions, and evaluate programs and services);
- Health education for residents;
- Community collaborations;
- Becoming more inclusive and culturally/linguistically appropriate in our services and materials;
- Creating and maintaining healthy outdoor environments.

### Ramsey County Departments Stakeholder Interviews

In November and December of 2013, members of the planning team gathered input from directors of other county departments, including the county manager, attorney's office, human services, public works, parks and recreation, community corrections, emergency management, Sheriff's office, library, veteran services, and workforce solutions. Public Health has a long history of successfully working with these other county departments on various initiatives, collaboratives and joint partnerships. The experience of these partnerships provided the framework for comments and suggestions provided.

Highlights from these stakeholder interviews include:

- strong encouragement for the department to work on a policy level to address health issues;
- encouragement to increase visibility and public presence as advocates promoting public health messages;
- support for greater promotion of the department's work, services and programs;
- appreciation for public health being creative, professional, responsive, innovative and flexible;
- a perception of public health as a strong partner and support for using the public health approach in addressing a wider variety of issues in Ramsey County;
- support for services and programs that promote the health and safety of all residents – from infants to the elderly – including violence prevention, environmental health and emergency preparedness;
- an interest in health disparities and the social determinants of health, and articulating the role for local public health in addressing these issues;
- a desire for enhanced collaboration county-wide to address cross-cutting issues; and
- an appreciation for the high level of trust public health has established within the community.

# Appendix G - Key Themes from Environmental Scans

## Community Health Services Advisory Committee Survey

In December 2013, the Community Health Advisory Committee (CHSAC) was invited to participate in an electronic survey that paralleled the employee survey. Committee members were asked for input regarding critical health issues, important opportunities, department strengths, and suggestions for improvement. The CHSAC identified the following community changes that they believe will have a significant impact on programs/ services of Saint Paul - Ramsey County Public Health:

- Increased impact of social determinants on health;
- Increased health care access – Affordable Care Act;
- Increased aging population;
- Increased diversity of population;
- Increased awareness of behavior impact on health - nutrition, exercise;
- Increased community collaboration.

The CHSAC identified the following as the most critical health-related issues facing the people of Ramsey County that need a response over the next five years:

- Social determinants including poverty, housing, transportation;
- Access to Care;
- Chronic Disease – e.g. improving nutrition and physical activity to address obesity;
- Mental health/behavioral health/substance abuse;
- Health disparities.

## Ramsey County Board of Commissioners Facilitated Discussion

In January of 2014, the Ramsey County Board of Commissioners participated in a strategic planning workshop to provide input through a series of questions pertaining to the most critical health-related issues and problems facing the county, as well as the strengths of the department, opportunities for reaching diverse populations, and key priorities for public health efforts. The Board provided input and direction along the following themes:

Key Strengths:

- Strong leadership/seen as the “go to” department on many issues;
- Good reputation/be deliberate about keeping it;
- Wide range of interests/services;
- Strong relationships with stakeholders;
- Can address issues that others can't;
- Teaching;
- High return on investment;
- Sees needs in the community and takes action/nimble;
- Devotion to individual needs.

# Appendix G - Key Themes from Environmental Scans

## Critical Issues:

- Apply public health model to issues;
- Address disparities and equity/social determinants of health;
- Continue being a leader in the community on key issues (e.g., Affordable Care Act);
- Use data for decision-making;
- Create electronic access to data and information for external audiences;
- Connect physical, mental health and chemical health;
- Focus on maternal and child health, seniors and youth;
- Address violence, especially sexual violence;
- Continue work based on prevention;
- Focus on community health and health care needs in a positive and community-focused way;
- Focus on healthy behaviors/measure outcomes.

## Opportunities to reach diverse populations and build relationships:

- Build capacity to attract talented individuals that reflect the community;
- Be an employer of choice - attract and retain/help them grow and stay;
- Expand definition of diversity;
- Provide a pathway for jobs.

## Focus for next five years:

- Data issues and access to data;
- Continue community engagement;
- Continue to build on community relationships;
- Connect to the County-wide goal of cultivating economic prosperity;
- Continued conversations with the Board;
- Build on county goal of excellence.

# Appendix H - SOAR Summary

Using the SOAR framework, the Department Leadership Team brainstormed the internal and external strengths, opportunities, aspirations and results.

## Strengths

Saint Paul – Ramsey County Public Health is the largest stand-alone public health department in the Midwest, with strong political and elected-official support. We provide a breadth of services with a strong community focus and history of collaboration and community partnership. We are adept at performance management and data gathering/analysis, with a committed, creative and very experienced workforce.

## Opportunities

Some of the identified internal opportunities include anticipated turn-over in staff in the near future as a number of employees reach retirement age, interest in providing outcome-based programs and services, ability to share our learnings locally and nationally to influence best practices, and the commitment of creative and passionate staff to addressing new and cross-cutting issues.

The fact that policy makers in the county understand the value of prevention, the national “health in all policies” effort, implementation of the Affordable Care Act, “healthy homes” as a model for addressing a range of public health issues, recent attention to climate change and related issues, and emerging infectious disease all represent external opportunities.

## Aspirations

When thinking about our ideal internal future state, the use of training and tools to help us accomplish goals, increasing the diversity among department leadership, creating an organizational structure that streamlines our work and supports flexibility and creativity, and embracing continuous quality improvement as part of our culture were identified. When thinking about our external aspirations, the DLT identified reduced health disparities, increased department role in shaping public policy, improved communication and marketing, improved health outcomes as a result of our efforts, and a focus on climate change and violence prevention as priorities.

## Results

This part of SOAR focuses on the results that will tell us if we’ve achieved our desired future state. The outcomes we strive for, by goal area, are:

### Goal 1: Health Equity

- There are actions we can point to that indicate we are working on health equity
- As a department, we’ve made progress in decreasing a health disparity that received department-wide focus
- Increased staff knowledge of health equity issues will lead to improved services and programs for all people
- Staff has a better understanding of health inequities and, as a result, provides more effective service to clients
- All staff will have an understanding of and practice approaches to increase health equity

# Appendix H - SOAR Summary

## Goal 1: Health Equity (continued)

- All staff understands what “health equity” means, and how their work relates to and affects it
- Health disparity data begin trending in positive ways
- Staff can articulate what they do to make a difference
- Health equity considerations are standard practice in all department programs
- By bringing health equity to the county’s work on prosperity/poverty, we have engaged others in work on health disparities
- A broader, more diverse group of people will apply for, and be hired to work for the department
- The department has a clear policy agenda that is reviewed each year and is well communicated
- The department’s health equity policy initiatives will be promoted by the county at the state and federal levels and lead to changes in law and policy

## Goal 2: Improved Health and Environmental Outcomes

- Increased staff knowledge of ACEs and impacts of violence
- Department will work more closely with funded community clinics on promoting joint health improvement strategies
- Comprehensive data collected and reported on related to clinical services with changes and positive outcomes
- Reduction in rates of violence across all types
- Funding is stable and increased for primary and secondary prevention efforts
- Client outcomes linked directly to practice

## Goal 3: Adaptive Approaches to Climate Change

- Department staff understands the impact of climate change on public health
- We work with others, in and out of health disciplines, to address public health and climate change
- Staff understands climate change, its relationship to public health, and how their work relates to it
- Public moves to individual planning/action
- Public responses committed to adaptation efforts
- Community understanding of public health impacts of climate has increased
- We have a good understanding of who is most vulnerable to public health impacts/climate change, and act to protect them
- Department staff will have a core understanding of climate change and how to incorporate knowledge into their everyday practice



# Appendix H - SOAR Summary

## Goal 4: Public Health Leadership

- Other entities use our information to craft policy positions
- We build stronger coalitions/partners
- The department continues to develop, continually update, and promote focused policy initiatives
- The department communicates its priorities, goals and policy objectives on a regular basis
- The department's role in leadership capacity is recognized by policy makers, key community groups, and the public
- We contribute to a unified voice on public policy positions
- The department is a recognized leader in taking positions on public health policy
- We have effective marketing of SPRCPH-who we are, what we do
- Community partners including non-profits, community agencies and municipalities (including St. Paul) will look to the department for direction and data on health issues
- All staff are knowledgeable about role of SPRCPH as a leader in key policy issues/priorities
- Successful legislative outcomes

## Goal 5: Public Health Infrastructure

- The department has achieved and maintains accreditation
- Less stringent grant application requirements
- We have a clear plan, and act on it, for staff development, consistent with the strategic plan
- Employee/department performance is evaluated via a standard process and is ongoing
- Board recognizes our excellence
- All department communications are high quality in terms of content, design and use of appropriate strategies for intended audiences
- Department has adequate staff and resources that are organized effectively to meet communication needs
- All department staff (DLT, supervisors, staff) will embrace a collective understanding of and commitment to excellence-all of our work will be more effective, efficient and impactful
- Staff competency increases are evaluated by pre- and post-training tests

# Appendix I - Alignment of Strategic Plan and Community Health Improvement Plan Objectives

The strategic plan is intentionally aligned with the Community Health Improvement Plan (CHIP). In particular, the strategic plan's focus on health disparities, adverse childhood experiences, violence prevention and clinical preventive services intersect with the CHIP-identified priorities of social determinants of health; nutrition, weight and active living; access to health services; mental health/mental disorders/behavioral health; and violence prevention, as summarized below.

## SPRCPH Objectives

### Health Equity

1. Increase knowledge by 10% above a baseline for all department staff of health inequities, the effects on the public's health, and relevance to their job roles and responsibilities, by July 1, 2016.
2. Create and implement an organizational framework within the department to ensure a focused approach to health equity, by December 31, 2015.
3. Identify one health disparity for concentrated focus, and develop department-wide strategies designed to address the disparity, every two years beginning December 31, 2014.
4. Establish annually a clear policy and advocacy agenda for the department to advance health equity, beginning July 30, 2014.
5. Identify and implement department-wide strategies that specifically promote economic prosperity within areas of concentrated poverty in Ramsey County, by December 31, 2018.

## Ramsey County CHIP Objectives

### Social Determinants of Health

1. Reduce the percentage of the population living in poverty in Ramsey County from 17% to 10% by December 2018.
2. Reduce the percentage of children under 18 living in poverty in Ramsey County from 26% to 16% by December 2018.
3. Reduce the percentage households paying 30% or more of income for monthly housing in Ramsey County from 38% to 28% by December 2018.
4. Reduce the unemployment rate for non-Hispanic white, black/African American, Asian, Hispanic age 16 and older groups in Ramsey County to 7% by December 2018.
5. Increase safe, accessible, efficient, affordable transportation options (transit, walking, biking) in Ramsey County by 20% by December 2018.
6. Increase the percentage of students in Ramsey County who graduate from high school within four years to the Healthy People 2020 goal of 82% by December 2018.

# Appendix I - Alignment of Strategic Plan and Community Health Improvement Plan Objectives

## SPRCPH Objectives

### Improve the Health and Safety of People and the Environment

1. Increase knowledge by 10% above a baseline for department staff of the current research related to (1) adverse childhood experiences and (2) violence, including the effects on the public's health and relevance to their job roles and responsibilities, by December 31, 2017.

## Ramsey County CHIP Objectives

### Access to Health Care

1. Increase the utilization of preventive services among publically funded enrollees and uninsured individuals in Ramsey County by 5% by December 2016.
2. Decrease inappropriate emergency room services among publically funded enrollees and uninsured individuals in Ramsey County by 5% by December 2016.

### Violence Prevention

1. Decrease the percentage of Ramsey County 9th graders who have been bullied during the last 30 days from 52% (in 2010) to 42% by December 2018
2. Increase the percentage of Ramsey County students of color who participate in out-of-school activities three or more times per week from 51% (in 2010) to 61% by December 2018.
3. Decrease the percentage of Ramsey County female students who have ever been "hit, hurt or threatened" by someone they are dating from 11% (in 2010) to 5% by December 2018.
4. Decrease the percentage of Ramsey County students of color who have ever having been "hit hard or often" by an adult from 16% (in 2010) to 0% by December 2018.



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