

STRATEGIC MANAGEMENT SYSTEM

Outagamie County Public Health
February 2025 Supplement



Public Health
Prevent. Promote. Protect.
Outagamie County
Health and Human Services



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Guiding Principles

Introduction

As an accredited local health department by Public Health Accreditation Board (PHAB), a strategic plan is a core function to assist us in identifying our roles, priorities, and direction towards success.

Our Strategic Management System model was introduced to our Public Health Division team in late 2023. This model has helped our entire team move toward embracing innovation, iterative thinking, and building a culture of experimentation within which we can continuously evaluate and learn from our strategic work.

This document is the first annual update to the Strategic Management System report initially released in 2024.

Mission

We use local data to prevent disease and injury, promote wellness, and protect the health of our communities through collaboration and best practice.

Vision

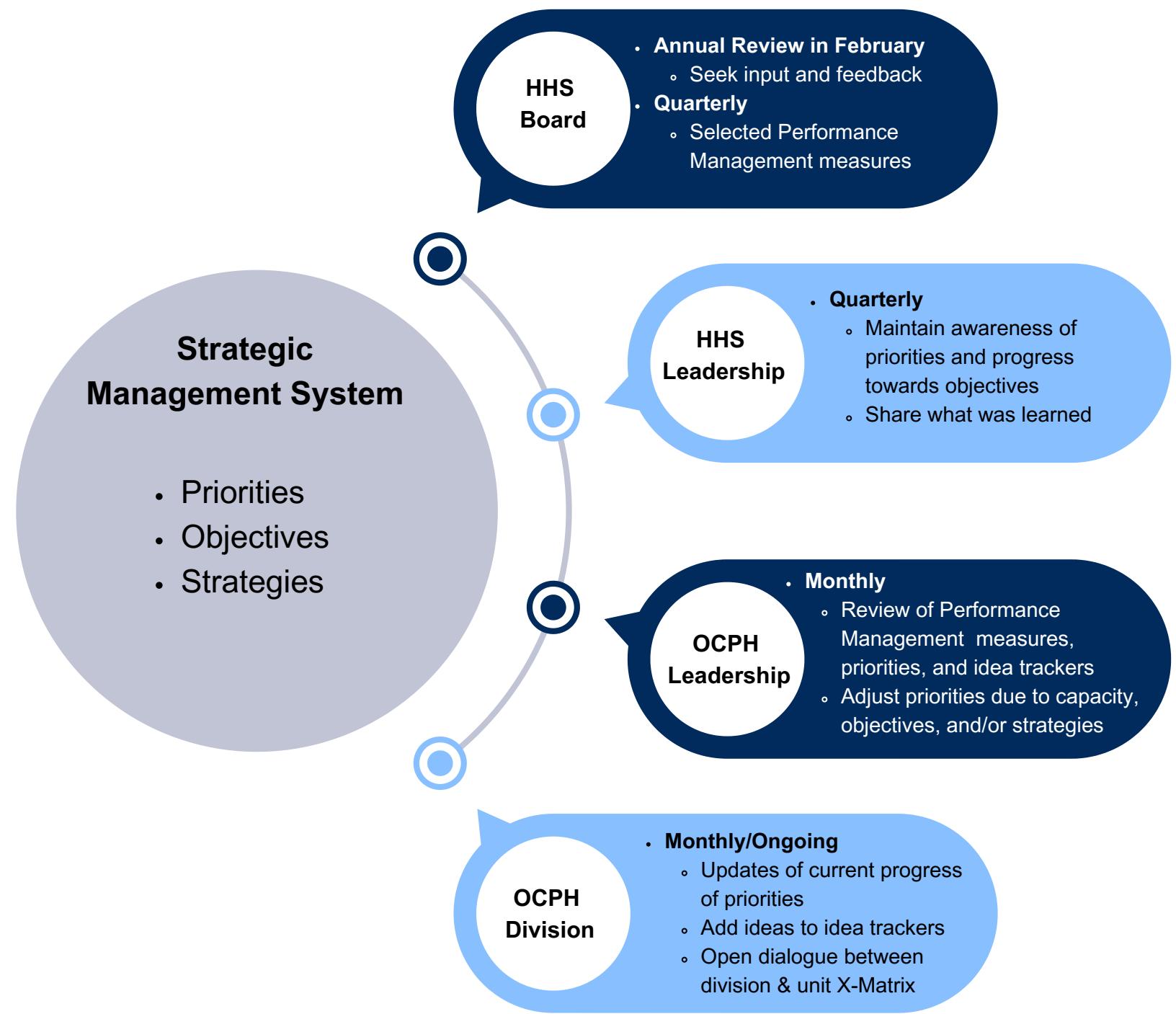
To be a leader in the pursuit of community-driven wellness.

Values

Invested in serving
Support through compassion
Create progress
Better together

We understand not everyone is familiar with the Strategic Management System model vs. the traditional Strategic Plan format. For an in-depth explanation of our system, please see our [2024 Strategic Management System Report](#)

Process Cycle



2024 Wrap-Up

Priorites we completed in 2024:

Update all Public Health Policies and Procedures: We started the year with 84 policies in Public Health. The amount of policies made updates difficult to accomplish on a yearly basis. Our staff identified the large number of policies were a barrier to their daily work. At the end of 2024, all policies were updated and the number of was reduced to 56.

Improve Emergency Preparedness Capability: In order to ensure our staff are familiar with terminology and methodology that may be used during an emergency event, we require all staff take the four common introductory National Incident Management System (NIMS) and Federal Emergency Management Agency (FEMA) courses within six months of hire. In quarter one of 2023, 58% of staff had completed the required courses. At the end of 2024, 100% of staff completed the courses.

Develop Environmental Health Competency: Environmental Health Sanitarians are required to complete a series of training exercises to ensure all staff are equipped with the skills to complete a risk-based retail food inspection. All 16 exercises were completed by the 4 Environmental Health Sanitarians within the goal date.

Increase Childhood (by age of 24 months) Immunization Completion Rates: In 2024 we implemented an active reminder recall system, we fell short of our 82% completion goal. Vaccination rates are an important way to measure how well communities are protected from vaccine-preventable diseases. This trend has been consistent across Wisconsin ([WI Department of Health and Family Services Immunization Data School and District Vaccination Rates](#)). Efforts will continue in learning and adapting activities based on the reminder recall system.

Activities Supporting the Start of the Tri-County CHA/CHIP: The newly develop Tri-County coalition will complete the Community Health Assessment (CHA) portion of the project in the second quarter 2025. After that, work will focus on the Community Health Improvement Plan (CHIP) that will be finalized in the third quarter. In 2024, Public Health dedicated the needed staff resources to support and assist the coalition in engaging various community partners and stakeholders across the tri-county to prioritizing critical health needs through data collection and analysis. Based on this support the coalition is projected to meet the necessary aligned timelines in 2025 between local health departments and health care systems.

2024 Wrap-Up

Priorities we are continuing to work on in 2025:

Promote Public Health Division Culture: We conducted a second round of our Public Health Division Annual Employee Survey in 2023. Staff indicated they wanted to focus on process improvements, and selected onboarding as the objective to focus on. The onboarding process was standardized across the division and units to introduce new employees to the organization and to provide basic direction they need to have a successful start in their role. Results from the Annual Employee Survey in 2024 showed that the changes made have been effective in improving onboarding, including responses from recently hired staff. Two new focus areas, staff involvement in decision-making and creating a process for staff engagement in community events, will be worked on in 2025.

Increase WIC Participation: Work will continue to increase WIC participation as the caseload for the Outagamie County project was expanded based on the eligibility within the population. Actions and process changes will continue to meet the contract objective of 95% contracted caseload. Additionally, a focus is on stabilizing the no show rate of WIC appointments to <25%, which will have a positive impact on WIC participation.

Decrease Sexually Transmitted Infections (STI) Rates: Work will continue on analyzing and examining trends of reportable STI diseases. The goal date of completion was changed due to workload and the sunsetting of the Communicable Disease Unit. Once a focus area is established through the review of data-sets and indicators, prevention initiatives will be developed.

Implement Public Health Division 2023-2025 CHIP: Our current three year CHIP priority work will conclude at the end of 2025. Our three workgroups focused on Mental Health, Access to Care and Housing and Homelessness where objectives and strategies were selected. View the most recent Public Health Division [2024 CHIP Annual Update](#).

Implementation of SmartCare (Big Rock): Supporting the implementation of SmartCare across Health and Human Services Department, Public Health Division will participate in learning the functionality and possible adaptations for effective client services. This priority will continue to be on our division X-Matrix as it requires staff resources. The work surrounding this fluctuates dependent upon department needs and timeframes.

Annual Review

The leadership team conducted the below as the annual review process:

- Reviewed the progress we have made on each of our SMART objectives
- Conducted an environmental scan
- Reviewed core components of our Strategic Management System
- Updated our strategic priorities, SMART objectives, and strategies
 - Selection accounted for alignment with:
 - Community Health Assessment (CHA), Community Health Improvement Plan (CHIP)
 - Performance Management (PM)
 - Quality Improvement (QI)
 - Workforce Development (WD)
 - Foundational Public Health Services - Foundational Areas (FA)
- Completed the PHAB [self-assessment for the Foundational Public Health Services](#)
 - This piece of the annual review was added in 2024 and going forward, will remain a part of the annual review process.
 - Included below are the results of the self-assessment.
 - While Injury Prevention and Chronic Disease are combined in the original self-assessment. OCPH leadership made the decision to score those two areas separately.
 - Each category was scored 1 through 4, with 1 being Absent and 4 being Expert/Full.

Foundational Area	Expertise Score	Capacity Score
Communicable Disease Control	3.0	3.1
Chronic Disease	2.0	2.3
Injury Prevention	3.3	3.5
Environmental Public Health	2.7	2.7
Maternal, Child, & Family Health	2.3	2.3
Access to & Linkage to Clinical Care	1.8	2.0

2025 Strategic Priorities

Strategic Priorities	SMART Objectives	Strategies
Implement the Tri-County CHA/CHIP	<ul style="list-style-type: none"> Finalize the Tri-County CHA by 4/30/25 and CHIP by 8/31/25 	<ul style="list-style-type: none"> Complete Tri-County Community Health Improvement Coalition Timeline Targets
Promote Public Health Division Culture (WD & PM)	<ul style="list-style-type: none"> By 12/31/25, will attend at least 6 community events led by OCPH staff Increase average score of 3.6 to 3.8 (5%) in serving customer needs (OCPH Annual Employee Survey) 	<ul style="list-style-type: none"> Creating a Process for Engaging the Community across the Division Further Staff Involvement in Decision-making
Increase WIC Participation (FA & PM)	<ul style="list-style-type: none"> By 12/31/25, WIC participation will meet or exceed 95% contracted caseload (2042) Maintain WIC no-show rate at or below 25% through 12/31/25 	<ul style="list-style-type: none"> Promote WIC Enrollments Decrease WIC Appointment No Show Rate Promote WIC online nutrition education
Chronic Disease Prevention (FA)	<ul style="list-style-type: none"> By 12/31/25, the FPHS Self-Assessment score exceed Expertise score of 2.0 and Capacity score of 2.3 	<ul style="list-style-type: none"> Create Chronic Disease Workgroup (evaluate background/current conditions)
Illness Reporting and Surveillance Complaints (FA & PM)	<ul style="list-style-type: none"> By 12/31/25, 95% of complaints receive appropriate follow up 	<ul style="list-style-type: none"> Create a Process for Receiving Complaints and Active Surveillance

2025 Strategic Priorities continued

Strategic Priorities	SMART Objectives	Strategies
Youth Engagement (FA)	<ul style="list-style-type: none"> • Improve Youth Engagement Assessment Tool organization readiness section score from 1.25 to 3.0 by 12/31/25 	<ul style="list-style-type: none"> • Identify Strategies to Improve Organization Readiness • Improve Selected Strategies Based on Staff and Leadership Assessment
HHS Department Operations Group	<ul style="list-style-type: none"> • Completion of a COOP plan for each HHS Division (8 COOP plans) by 3/1/2025 	<ul style="list-style-type: none"> • Establish a Foundation and Determine Structure
Car Seat Access - Internal Optimization (QI & PM)	<ul style="list-style-type: none"> • Maintain 85% show rate at car seat fitting stations through 12/31/25 	<ul style="list-style-type: none"> • Identify a Second Car Seat Fitting Station Location • Implement Online Scheduling Tool
Implement the Public Health Division 2023-2025 CHIP	<ul style="list-style-type: none"> • Complete 80% of the Mental Health objectives and strategies by 12/31/25 • Share the housing guide with 75% of the initially identified community organizations by 12/31/25 	<ul style="list-style-type: none"> • Increase Available Mental Health Resources • Create a Culture Mental Wellness • Advocate for Affordable Housing
Decrease STI Rates Among 15-24 Year Old (PM & FA)	<ul style="list-style-type: none"> • By 12/31/25, reduce by 2% chlamydia and gonorrhea rates 	<ul style="list-style-type: none"> • Increase Awareness and Access to STI Prevention Materials and Testing
2027 PHAB Reaccreditation (Big Rock)	<ul style="list-style-type: none"> • By 03/2027 all evidence for PHAB Reaccreditation will be submitted 	<ul style="list-style-type: none"> • Domain leaders create a timeline of completion for their required documents.