

2021-2025



Indiana Department of Health: Agency Strategic Plan



Indiana
Department
of
Health



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Executive Summary

During 2020, the Indiana Department of Health embarked on a strategic planning process to establish the direction and course of the agency for the next five years. We engaged Chamberlin/Dunn to facilitate the process and provide expertise.

The strategic planning committee and the executive team provided a series of opportunities for staff to give their input on the direction of the agency throughout the process. More than 600 staff from every commission and division in the agency participated in this process, including employees and contracted staff located across the state. The staff was asked to provide input on the vision, mission, and values. The agency also worked with staff and community partners to gather their perceptions of the agency's strengths, weaknesses, opportunities, and threats as well as proposed priorities over the next five years. The results of these assessments directly informed the objectives and strategies in this strategic plan. Every effort was made to ensure strategies and objectives are aligned with the State Health Improvement Plan, existing division-level strategic plans, quality improvement plan, workforce development plan, as well as appropriate national targets for health goals such as Healthy People 2030.

This Strategic Plan answers the question: What can we do to help all Hoosiers reach their optimal health? We considered key support functions required for efficiency and effectiveness and sought to articulate what the department plans to achieve as an organization, the actions it will take, and how it will measure success. The identified measures are embedded within the department's performance management system and will be tracked regularly throughout the life of this plan. It is a living document that will be continuously evaluated and updated as public health evolves in Indiana and new federal and state plans are updated.



The Indiana Department of Health Strategic Plan 2021-2025 answers the question:
What can we do to help all Hoosiers reach their optimal health?

Letter from the State Health Commissioner

Dear Reader:

I am pleased to share with you the second strategic plan completed during my tenure as Indiana's 27th State Health Commissioner. Our first plan was adopted in May 2018 and went through December 2020.

The Indiana Department of Health's 2021-2025 Strategic Plan strives to embody our vision that all Hoosiers reach their optimal health regardless of where they live, learn, work, or play. The goal of the strategic plan is to provide a road map for the agency over the next five years that aligns with Governor Eric J. Holcomb's Next Level Agenda, which includes a public health pillar. Our strategic plan identifies agency priorities and outlines how the agency will address those priorities and how we will measure our success. It also includes an ambitious vision for reimagining the delivery of public health so that we can modernize our public health infrastructure, which was developed 139 years ago.

The development of this plan comes during a unique time in our history. We are not only battling a pandemic larger than we have seen in over 100 years, but we also are seeing a rise in the movement for equality. Racial and economic diversity are not new to public health. Because of this, we have included activities to address health equity and disparities throughout all our goals and objectives as we strive for equity for all staff and Hoosiers

I want to extend a heartfelt thank you to the many staff and community partners who provided input during the development of the plan – especially in light of all the challenges we have faced this past year. I also want to thank Chamberlin/Dunn and the Office of Public Health Performance Management for their support and guidance throughout this process. It is now our responsibility to honor everyone's commitment of time and implement this plan. The goals and objectives identified are geared toward:

- Health Services and Outcomes
- Workforce Stability
- Partnerships and Collaborations
- Financial Stewardship and Sustainability
- Operational Excellence

I am confident that with strong and committed employees and partners, our strategic plan will lead us to success.

Yours in health,



Kristina M. Box, M.D., FACOG
State Health Commissioner





Our Mission

To promote, protect, and improve the health and safety of all Hoosiers.



Our Vision

Every Hoosier reaches their optimal health regardless of where they live, learn, work, or play.



Our Values

Health Equity

We place equity at the center of our work to ensure every Hoosier, regardless of individual characteristics historically linked to discrimination or exclusion, has access to social and physical supports needed to promote health from birth through end of life.

Communication

We provide stakeholders and the public accurate and up-to-date scientific data and provide education and resources regarding utilization of evidence-informed practices in a timely manner.

Innovation

We continue to learn, research evidence-informed practices, advance our services, and be open to new methods, ideas, and products that help build and expand upon the services we provide.

Integrity

We are honest, trustworthy, and transparent. We uphold our standards and do the right things to achieve the best public health and safety outcomes.



**Indiana
Department
of
Health**

Organizational Chart

Kristina Box, MD
State Health Commissioner

Pam Pontones, MA
Deputy Commissioner & State Epidemiologist

- Public Health Performance Mgmt
- Epidemiology Resource Center
- HIV, STD, Viral Hepatitis

Lindsay Weaver, MD
Chief Medical Officer

- Minority Health & Wellness
- Tobacco Prevention & Cessation
- Oral Health

Shane Hatchett, MS
Chief of Staff

- Deputy Chief of Staff & Communications
- Legislative & External Affairs
- Finance
- Technology & Compliance
- Data & Analytics
- Legal Affairs
- Human Resources
- Healthy Hoosiers Foundation

Eldon Whetstone, JD
Assistant Commissioner, Health & Human Services

- Women, Infants, & Children
- Maternal & Child Health
- Children's Special Healthcare
- Women's Health
- Chronic Disease & Rural Health
- Nutrition & Physical Activity
- Trauma & Injury Prevention
- Fatality Review & Prevention
- Center for Deaf & Hard of Hearing

Matt Foster, JD
Assistant Commissioner, Consumer & Health Care Regulation

- Long-term Care
- Survey Support and Guidance
- Acute & Continuing Care
- Complaints & Incidents
- Program Performance & Development
- Radiology, Weights, & Measures
- Vital Records

Lixia Liu, PhD
Assistant Commissioner & State Lab Director

- Chemistry
- Clinical Microbiology
- Environmental Microbiology
- Virology & Serology
- Biological Preparedness & Outreach
- Quality Assurance

Shirley Payne, PhD
Assistant Commissioner, Public Health Protection

- Environmental Health
- Food Protection
- Emergency Preparedness
- Lead & Healthy Homes
- Immunizations

About the Process

The Indiana Department of Health has strived to create a Strategic Plan that was developed and owned by the entire agency. In early March 2020, the Office of Public Health Performance Management (OPHPM) reached out to staff, supervisors, and managers to identify staff who would represent the voice of the agency leading to the creation of the Strategic Planning Committee. This committee oversaw the development of the agency's Strategic Plan. The committee included 27 staff members who represented all commissions and agency levels, and diverse demographics.

A timeline and framework for the plan were developed in the early stages. OPHPM worked with a contractual partner to help facilitate meetings and the executive retreat and conduct the SWOT (strengths, weaknesses, opportunities, and threats) analysis. The department reviewed its mission, vision, and values in early 2020. There was overwhelming support to maintain the current mission statement; however, the committee received a variety of comments regarding the vision and values. The findings were brought back to the executive team, and a follow-up survey was sent to all agency employees. This survey led to the first three values. After staff expressed concern about a lack of focus on health equity, the Health Equity Council was asked to develop the fourth value to emphasize the agency's priority. Executive staff agreed that moving from a health equity statement to a value was needed, not just for staff, but for the work the agency does

An assessment for strengths, weaknesses, opportunities, and threats was conducted with all employees, as well as selected community partners (Appendix II). Within this assessment, the staff was also provided an opportunity to state what priorities they believe the agency should have over the next five years. The executive team held a retreat in August 2020 and identified five goals that would provide the foundation for the agency's work over the life of this plan.

In September 2020, OPHPM and identified staff participated in focus groups for each of the strategic goals. These focus groups included the executive team, the Strategic Planning Committee, and the Accreditation team. The groups were developed to identify objectives and possible activities for each identified goal. A follow-up survey was then sent to supervisors and managers for them to have the opportunity to add any additional activities their divisions and programs are already doing, or were planning to do, that also address the plan's goals and objectives. Members of the Strategic Planning Committee and the OPHPM partners can be found in Appendix II.

Performance Management Process

To facilitate the successful implementation of key agency plans, such as the strategic plan, the Indiana Department of Health began the implementation of our performance management system, VMSG, in late 2018. The agency defines public health performance management as the practice of using data to improve the public’s health. This involves strategic use of performance measures and standards to establish performance objectives and targets; regular measurement monitoring toward objectives; and engaging in quality improvement activities when desired progress is not achieved. Establishing a Performance Management System is a proven way to enhance performance and achieve desired results. Each employee at IDOH has a role in creating an ideal work environment and should actively engage in problem solving and improvement. Improving individual and program performance will increase our capacity to positively impact our customers and provide better public health services.

Working with internal owners, the Indiana Department of Health worked to develop activity level metrics to support our goal progress, set up periodic reviews and collection processes to monitor the data housed in our Performance Management System (i.e. VMSG), and established peer oversight of the plan’s progress through the creation of the IDOH Metrics Team. These foundational supports were and continue to be critical components to driving the success of performance management within the agency. With this implementation, we were able to pilot this process to help us achieve our goals and objectives found within the 2018-2020 Strategic Plan. To further promote data transparency and continued communication, the Office of Public Health Performance Management has been tasked with ensuring that the Strategic Plan is reviewed annually, updated as necessary and that our metric standing is shared with the agency through a Strategic Plan Annual Report. The annual report provides an overview of the agency’s direction, celebrates our accomplishments, and provides metric standing at the activity level.

For further information on IDOH's performance management system, please access the Quality Improvement & Performance Management plan, [linked here](#).



Figure 1: The performance management cycle depicted above outlines the process in which the agency reviews each Goal, Objective, and Strategy housed within our performance management system. Through the embedment of the Culture of Quality within the agency and in partnership with committed, visible leadership, we can continuously work and apply this lens in our evaluation of key state and agency plans.



Goals, Objectives, and Strategies



Goals, Objectives, and Strategies

Health services and outcomes

GOAL 1: Ensure access to high quality, evidence-based, and continuously improving services and resources that reduce health disparities and proactively address public health threats, leading to equitable outcomes.

Objective 1: Ensure all staff can build upon their health literacy and education by increasing access to academic research, professional development, and Culturally and Linguistically Appropriate Standards training.

- Train staff on core public health competencies and ensure they have baseline knowledge of how their role fits in the public health system
- Work at the division level to coordinate the marketing of resources to maximize our reach to priority populations and avoid overlapping audiences
- Improve accessibility of information to Hoosiers available on our public-facing webpages.
- Expand public health pipeline programs (e.g., internships, apprenticeships, etc.) to include authentic service and experiential learning.

Objective 2: Apply an intentional framework to provide services that reflect representativeness and equitable access.

- Increase the proportion of staff who complete at least two educational courses per calendar year on antiracism, implicit bias, health equity, and cultural competency
- Include geographic and ethnic diversity in agency programming and planning through the expansion of the steering committee model within the Health Equity Council.
- Construct advertising materials, recruitment, and educational tactics for target communities and populations through consumer focus groups.
- Through the analysis of the annual agency needs assessment, the Health Equity Council will work to create a language access plan that will ensure language and translational services are utilized by agency staff and that agency communication materials are used in an efficacious an efficient manner.
- Create and review an agency standard of how to communicate both internally and externally about data limitations when subpopulations must be excluded from analysis and reporting.
- Promote opportunities for discourse on racial and health equity through structured dialogues and staff spotlights.
- Working with community partners and internal stakeholders, create legislation mandating employers provide reasonable workplace accommodations for pregnant workers.



Objective 3: Internally promote access and quality in all external partner and vendor relationships by increasing the number of requests for proposals and contracts that include equity-based language.

- Examine our contract and grant language to ensure clear expectations within the agency grant review process by including equitable access and the related language in issued requests for proposals (RFPs) and requests for contracts (RFCs).
- Create a communication channel that shares results of unique vendor relationships and upcoming opportunities for contract internally within the agency and externally with policymakers, partners, and the public.
- Prioritize the implementation of policies and procedures that are informed by the lived experiences of Hoosiers to support the goal of achieving equity and representation.
- Annually review all policies within MediaLab to ensure that their contents are both applicable to the agency's direction and reflective of programmatic expectation.

Objective 4: Create data governance processes and infrastructure to ensure the accuracy, consistency, and availability of data.

- Align data systems within the agency to "connect the dots" between programs and interventions.
- Working with internal stakeholders, expand the capabilities of Stats Explorer to capture public health data, specifically those focusing on Indiana's health disparities.
- Gather qualitative data from panels comprised of those who use our IDOH services to better understand and respond to the experiences of our constituents.
- Ensure the agency's Performance Management Plan is continually updated and revised to provide standardized data -based definitions for the agency.
- Create a regularly updated Commissioner's dashboard for the tracking of division, legislative, and program area data .

Objective 5: Promote the integration of public health services across multiple levels of government to ensure consistent and effective delivery across the state

- Pursue increased funding opportunities and diverse funding sources for public health at-large to meet the national average per capita for public health spending.
- Promote streamlining of public health structure to ensure effective local engagement while reducing variation in the quality of services across the state.
- In alignment with the Healthy People 2030 report, implement plans that will address Indiana's leading health factors.
- Work with local fatality review teams to gather data and information about Indiana's social determinants of health and risk factors associated with injury and/or death.
- Work to reduce Indiana's infant and maternal mortality rates in all populations, especially in our minority populations.
- Ensure that Hoosiers are appropriately immunized and increase the immunization rate for all Hoosiers.

Partnerships and collaborations

GOAL 2: Implement a statewide, collaborative approach to improving Indiana's health outcomes.

Objective 1: Leverage broad and diverse expertise to address multiple determinants of health.

- Leverage the data collected in the State Health Assessment and State Health Improvement Plan to inform a community asset map that identifies the state's partners in reaching target audiences and priority populations and addressing priority issues.
- Promote intra-and inter-agency networking to connect similar roles across the state's agencies and partner organizations.
- Increase community-based feedback opportunities such as town forums, surveys, and advocate boards to build a relationship with the community and better address social determinants of health across the state.

Objective 2: In collaboration with external partners, strive to build mutually beneficial relationships through the annual evaluation of partnerships and partner-associated projects.

- Partner with Indiana University-Purdue University Indianapolis (IUPUI) to conduct an external review of our Emergency Preparedness hot wash and after-action procedures.
- Proactively create space for staff and partners to participate in conversations where they can provide direct input and feedback and share their expertise.
- Reinforce the importance of understanding our partners' priorities and encourage staff to actively seek opportunities for mutually beneficial relationships.
- Seek opportunities to diversify our funding streams so the agency, specifically our program areas, can provide collaborative, technical assistance, and support to our partners.
- Administer an annual partnership evaluation survey to gauge areas to improve our partnerships and conduct project review assessments to continually assess our areas of improvement within partnerships.
- Increase awareness of accepted new and existing publications promoting our agency and partner's work.



Objective 3: Reduce barriers for partners to work with the Indiana Department of Health by modernizing our processes and consumer interactions.

- Build multidisciplinary teams and participate in learning cohorts.
- In collaboration with process owners and partners, Healthcare Regulation Commission will create an electronic system to field online submissions, track license status, integrate with other state agencies, and provide licensing notifications.
- In collaboration with FSSA, the division of Long-Term Care will work to ensure that Medicaid-eligible residents 65 years and older have increased access to healthcare services.
- Create an opt-in system for the public and our partners to register for topic distribution listservs and opportunities for partnership.
- Modernize the department's regulating authority and operations to eradicate any underlying authorities or management approaches within legislation, policies, and procedures that have not kept pace.
- Standardize the application of the customer satisfaction survey to identify areas of success and improvement in our external-facing services.
- When modernizing our operational systems and services, identify mechanisms to address technological access concerns.

Objective 4: Ensure effective and ongoing partner communication by increasing opportunities to connect with local health departments and collaborative partners group.

- Develop a comprehensive assessment of Indiana's local health departments that analyzes their delivery of public health services and captures potential areas of improvement in the state.
- Coordinate internally to maximize external participation in the department's existing meetings, councils, partner groups, and relationships.
- Create a network of agency representatives who can serve as a centralized point of contact for external customers requesting information or resources for developing community action teams.
- Create, update, and maintain a local health department contacts list and ensure this list includes the local health officer, primary and secondary contact information, and associated roles.
- Ensure each position in the agency has a standardized operating procedure and identified back up(s).

Operational excellence

GOAL 3: Improve staff, customer, and partner experiences with consistent, efficient, effective, and data-driven services and work processes.

Objective 1: Develop support systems within the agency to maximize the work completed by divisions and program areas.

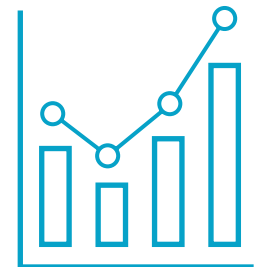
- Promote continuous evaluation of internal operational support systems to identify opportunities for these teams to modernize and adapt their systems.
- Work with SPD to promote the use of SuccessFactors in the agency for employee relationships, staff development, and succession planning within the agency.
- Increase brand recognition and awareness for the agency both internally and externally.
- Achieve PHAB accreditation by end of 2021 and maintain continuous compliance with PHAB accreditation standards.

Objective 2: Implement refined feedback loops and mechanisms that will gather internal data and continuously improve the agency's internal processes.

- Modernize our operations and communication assets, including webcast room and media room, to ensure that we communicate the right message, both internally and externally, at the right time, to the right audience.
- Increase opportunities for staff to provide real-time, asynchronous, and anonymous input on operational improvements that do not rely on the supervisory chain, through town halls, open houses, think tanks, and anonymous surveys.
- Create and maintain an organizational directory outlining the agency at the divisional and programmatic levels.
- Implement consistent processes to regularly review policies and procedures to ensure compliance and effectiveness.
- Evaluate the employee onboarding experience and implement continuous improvements.

Objective 3: Embed a culture of quality in our agency operations by increasing the number of trainings and resources provided to the agency on continuous quality improvement.

- Document the agency's dedication to continuous improvement methodologies within the agency through its philosophy and values.
- Create intentional, agency-wide messaging to promote a Culture of Quality where staff learns to improve the things within their control and encourage communication on how to address the barriers they face in their roles.
- Leverage the Quality Improvement Team to implement short-term, voluntary problem-solving teams for seemingly intractable issues.
- Celebrate successes of quality improvement projects within the agency to highlight areas of opportunity and replication across program areas.
- Help staff learn the realities of project planning through the implementation of action steps, barrier identification, and scoping.
- Invest in physical plant and technology regularly to improve environment and downline replacement costs and assets



Workforce stability

GOAL 4: Attract and retain a dedicated, knowledgeable, and diverse workforce to support strong public health outcomes in Indiana.

Objective 1: As an agency, provide all levels of staff opportunities and means to cultivate talent and encourage workforce diversity.

- Train and hold agency leaders accountable to have conversations with their staff about succession planning and exploring potential avenues to advance within the agency.
- Create an agency index of qualifications, certifications, and skills per employee that could be referenced when opportunities arise outside of their daily job duties as an appendix to our Continuity of Operations Plans.
- Increase the utilization of employee resources, such as Leadership At All Levels, LinkedIn Learning, IN-TRAIN, and SuccessFactors Learning for skill development, coaching, and growth .
- Increase the proportion of interns who set public health competency goals and indicate they increased their knowledge and understanding of the identified public health competencies.
- Create a mechanism to track the number of IDOH Internships that result in new agency talent.

Objective 2: Ensure that all agency staff is awarded opportunities for leadership development and mentorship every month within the workplace.

- Throughout 2021, create a mentorship program that matches a mentee and mentor based on job classification.
- Provide supervisors and managers monthly opportunities to expand their managerial expertise for supervising staff, applying policies in the workplace, and having crucial conversations.
- Maintain and expand the platforms (i.e. via in-person, online, and virtual) in which workforce development trainings are provided to staff .
- Provide leadership the opportunity and skills to apply the results of the Culture and Climate Survey into actual practice.

Objective 3: Increase staff's feeling of trust, communication, and respect as measured by the staff engagement survey.

- Educate staff on the interconnectedness of all types of staff and how their roles fit and support the agency's mission and vision.
- Create opportunities to highlight employee engagements, including but not limited to national rankings or seats, external presentations, and academic publishing.
- Operationalize internal communications channels specifically designed for recognizing exemplary work at all levels.
- Continue to work with the engagement team to identify opportunities to recognize and improve staff experiences within the agency.

Objective 4: Retain current staff expertise by reducing the turnover of employees, excluding promotion and retirement.

- For key job types, re-benchmark salary ranges in partnership with the State Personnel Department and the State Budget Agency as budgets allow.
- Use exit surveys to identify areas of opportunity and inform management of potential barriers in the employee lifecycle.
- Administer the Energage survey and the Culture and Climate Survey and use the results to inform initiatives to reduce turnover and increase employee satisfaction.
- Develop strategies at the Commission level to operationalize the agency-level data on retention and employee experience.
- In conjunction with the Engagement Team, hold an Appreciative Inquiry summit focused on the development of strengths-based solutions to retention and employee satisfaction.



Financial stewardship and sustainability

GOAL 5: Improve financial infrastructure, management, and data-informed decision making.

Objective 1: Enhance the speed and accuracy of finance functions and communicate realistic expectations by increasing finance resources for staff.

- Create a timeline of events for agency staff to reference that outlines Finance's peak seasons so programs can avoid submitting requests or procurements at that time.
- Improve the financial process-change documentation and communication.
- Examine the approval matrix for contract agreements and identify areas of opportunity to reduce steps and time.
- Consider centralization and standardization of billing processes for external partners and vendors.
- Streamline the billing processes for external partners and vendors.
- Explore the feasibility of a "reconciliation unit" to identify overpayments, collections, or duplicate billings.
- Modernize our processes to electronic-based and reduce our paper-based processes.
- Standardize the distribution of monthly programmatic standing and annual review reports to ensure programs are accurately tracking their spending.
- Fully support and maximize implementation of the new Human Resources and Payroll system to promote self-service functionality and reduce transaction timelines.

Objective 2: Optimize management of grant funds and programs by implementing measures that diversify the agency's funding sources.

- Examine and expand the use of best practices in sub-recipient monitoring, including clarification of role between program and finance staff, and additional training and standardization of both programmatic and financial monitoring.
- By 2022, the department will explore an embedded Revenue Cycle Unit (RCU) to provide direct support to local health departments.
- Regularly evaluate licensure fees to ensure that they offset the cost of licensure administration in Indiana.
- Beginning in June 2020, the IDOH Finance Division in partnership with the Family Social Services Administration (FSSA) will investigate systematic ways to maximize the cost allocation for charging Medicaid to reduce administrative burden while increasing the agency's revenue.
- Evaluate the need to establish dedicated funds to collect user fees and other revenue to directly link revenue and expenditures in discrete cost centers.
- Create an interactive repository of grant opportunities for the agency where programs can identify available opportunities, connect with staff experienced in grant writing, and create internal partnerships.

Objective 3: Maximize all available funding through information sharing and clear communication through the creation and continuous review of an internal dashboard.

- Classify contracts and grants into comprehensive programs of work so disparate funding sources and projects can be braided together for maximum effect.
- Monitor underspending and identify flexibility or applicability of funds to related priority areas and communicate opportunities for resource-sharing.
- Conduct a yearly review of existing fee schedules and rebase them to account for administration, overhead, and other costs.
- By midyear 2021, internal stakeholders including but not limited to Finance, the Office of Legal Affairs, and Local Health Department Outreach will create contract and grant language that discourages the supplementation of local funds.
- Examine common demerits in rejected grant applications and opportunities to build capacity to address those weaknesses and quantify the impact for future applications.





Appendices



Appendix I: Scorecard

GOAL 1: HEALTH SERVICES AND OUTCOMES. Ensure access to high-quality, evidence-based, and continuously improving services and resources that reduce health disparities and proactively address public health threats, leading to equitable health outcomes.

Objective 1.1

Ensure that all staff can build upon their health literacy and education by increasing access to academic research, professional development, and CLAS trainings

Owner(s)

- | | | |
|---|--|---|
| 1 | Train staff on core public health competencies and ensure they have a baseline knowledge of how their role fits in the public health system. | All IDOH Program Leads |
| 2 | Work at the division level to coordinate the marketing of resources to maximize our reach to our priority populations and avoid overlapping audiences. | Office of Public Affairs |
| 3 | Improve accessibility of information to Hoosiers available on our public-facing webpages. | IDOH Program Leads IOT/OTC |
| 4 | Expand public health pipeline programs (e.g. internships, apprenticeships, etc.) to include authentic service and experiential learning. | Division of Nutrition and Physical Activity Tobacco Prevention and Cessation Lead and Healthy Homes Division of Trauma and Injury Prevention Office Public Health Performance Management |

Objective 1.2

Apply an intentional framework to provide services that reflect representativeness and equitable access.

Owner(s)

- | | | |
|---|---|--|
| 1 | Increase the proportion of staff who complete at least two educational courses per calendar year on antiracism, implicit bias, health equity, and cultural competency. | Office of Minority Health Health Equity Council |
| 2 | Include geographic and ethnic diversity in agency programming and planning through the expansion of the steering committee model within the Health Equity Council. | Health Equity Council |
| 3 | Construct advertising materials, recruitment, and educational tactics for target communities and populations through consumer focus groups. | Health Equity Council Office of Public Affairs |
| 4 | Through the analysis of the annual agency needs assessment, the Health Equity Council will work to create a language access plan that will ensure language and translational services are utilized by agency staff and that agency communication materials are used in an efficacious and efficient manner. | Office of Minority Health Health Equity Council |
| 5 | Create and review an agency standard of how to communicate both internally and externally about data limitations when subpopulations must be excluded from analysis and reporting. | Office of Public Affairs Health Equity Council IDOH Metrics Team |

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| 6 | Promote opportunities for discourse on racial and health equity through structured dialogues and staff spotlights. | Office of Minority Health Health Equity Council Executive Leadership |
| 7 | Working with community partners and internal stakeholders, create legislation mandating employers provide reasonable workplace accommodations for pregnant workers. | Office of Legislative Affairs |
| Objective 1.3 | | |
| Internally promote access and quality in all external partner and vendor relationships by increasing the number of requests for proposals and contracts that include equity-based language. | | Owner(s) |
| 1 | Examine our contract and grant language to ensure clear expectations within our grant review process by including equitable access and the related language in issued requests for proposals (RFPs) and request for contracts (RFCs). | Health Equity Council Finance Office of Public Affairs |
| 2 | Create a communication channel that shares results of unique vendor relationships and upcoming opportunities for contract internally within the agency and externally with policymakers, partners, and the public. | Office of Public Affairs Office of Legislative Affairs IOT/OTC |
| 3 | Prioritize the implementation of policies and procedures that are informed by the lived experiences of Hoosiers to support the goal of achieving equity and representation. | Office of Public Health Performance Management Office of Minority Health |
| 4 | Annually review all policies within MediaLab to ensure that their contents are both applicable to the agency's direction and reflective of programmatic expectation. | Health Equity Council Office of Public Health Performance Management IDOH Program Leads |
| Objective 1.4 | | |
| Create data governance processes and infrastructure to ensure the accuracy, consistency, and availability of data. | | Owner(s) |
| 1 | Align data systems within the agency to "connect the dots" between programs and interventions. | Chief Data Officer Office of Public Health Performance Management IDOH Metrics Team Epidemiology Resource Center |
| 2 | Working with internal stakeholders, expand the capabilities of Stats Explorer to capture public health data, specifically those of Indiana's health disparities. | Chief Data Officer Office of Public Health Performance Management IDOH Metrics Team Epidemiology Resource Center |

| | | |
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| 3 | Gather qualitative data from panels comprised of those who use our services to better understand and respond to the experiences of our constituents. | Office of Public Affairs IDOH Program Leads |
| 4 | Ensure the agency's Performance Management Plan is continually updated and revised to provide standardized data-based definitions for the agency. | Chief Data Officer Office of Public Health Performance Management IDOH Metrics Team |
| 5 | Create a regularly updated Commissioner's dashboard for the tracking of division, legislative, and program-area data. | Chief Data Officer Executive Leadership Office of Public Health Performance Management IDOH Metrics Team Epidemiology Resource Center |
| Objective 1.5 | | |
| Promote the integration of public health services across multiple levels of government to ensure consistent and effective delivery across the state | | Owner(s) |
| 1 | Advocate for increased funding opportunities and diverse funding sources for public health at-large to meet the national average per capita for public health spending. | Finance IDOH Program Leads Executive Leadership |
| 2 | Advocate for streamlining of public health structure to ensure effective local engagement while reducing variation in the quality of services across the state. | Legislative & External Affairs Local Health Department Outreach Executive Leadership IDOH Program Leads |
| 3 | In alignment with the Healthy People 2030 report implement plans that will address Indiana's leading health factors. | Office of Public Health Performance Management IDOH Program Leads |
| 4 | Work with local fatality review teams to gather data and information about Indiana's social determinants of health and risk factors associated with injury and/or death. | Office of Fatality Review and Prevention |
| 5 | Work to reduce Indiana's infant and maternal mortality rates in our minority populations. | Maternal and Child Health |
| 6 | Ensure that Hoosiers are appropriately immunized and increase the immunization rate for all Hoosiers. | Immunizations |

GOAL 2. PARTNERSHIPS AND COLLABORATION. Implement a statewide, collaborative approach to improving Indiana's health outcomes.

Objective 2.1

Leverage broad and diverse expertise to address multiple determinants of health.

Owner(s)

- | | | |
|----------|---|--|
| 1 | Leverage the data collected in the State Health Assessment and State Health Improvement Plan to inform a community asset map that identifies the state's partners in reaching target audiences and priority populations and addressing priority issues. | Office of Public Health Performance Management Office of Public Affairs |
| 2 | Promote intra- and inter-agency networking to connect similar roles across the state's agencies and partner organizations. | IDOH Program Leads |
| 3 | Increase community-based feedback opportunities such as town forums, surveys, and advocate boards to build a relationship with the community and better address social determinants of health across the state. | IDOH Program Leads |

Objective 2.2

In collaboration with external partners, strive to build mutually beneficial relationships through the annual evaluation of partnerships and partner-associated projects.

Owner(s)

- | | | |
|----------|--|--|
| 1 | Partner with Indiana University-Purdue University Indianapolis (IUPUI) to conduct an external review of our Emergency Preparedness hot wash and after-action procedures. | Epidemiology Resource Center Division of Emergency Preparedness |
| 2 | Proactively create space for staff and partners to participate in conversations where they can provide direct input and feedback and share their expertise. | IDOH Program Leads |
| 3 | Reinforce the importance of understanding our partners' priorities and encourage staff to actively seek opportunities for mutually beneficial relationships. | IDOH Program Leads |
| 4 | Seek opportunities to diversify our funding streams so the agency, specifically our program areas, can provide collaborative, technical assistance, and support to our partners. | IDOH Program Leads Finance |
| 5 | Administer an annual partnership evaluation survey to gauge areas to improve our partnerships and conduct project review assessments to continually access our areas of improvement within partnerships. | Office of Public Health Performance Management Office of Public Affairs |
| 6 | Increase awareness of accepted new and existing publications promoting our agency and partner's work. | Office of Public Health Performance Management Office of Public Affairs |

| Objective 2.3 | | |
|---|---|---|
| Reduce barriers for partners to work with the Indiana Department of Health by modernizing our processes and consumer interactions. | | Owner(s) |
| 1 | In collaboration with process owners and partners, Healthcare Regulation Commission will create an electronic system to field online submissions, track license status, integrate with other state agencies, and provide licensing notifications. | Acute Care Finance LTC OTC |
| 2 | In collaboration with FSSA, the division of Long-Term Care will work to ensure that Medicaid-eligible residents 65 years and older have increased access to healthcare services. | Long-Term Care Finance |
| 3 | Create an opt-in system for the public and our partners to register for topic distribution listservs and opportunities for partnership. | Office of Public Affairs IOT/OTC |
| 4 | Modernize the department's regulating authority and operations to eradicate any underlying authorities or management approaches within legislation, policies, and procedures that have not kept pace. | IDOH Program Leads Executive Leadership Legislative & External Affairs |
| 5 | Standardize the application of the customer satisfaction survey to identify areas of success and improvement in our external-facing services. | Office of Public Health Performance Management |
| 6 | When modernizing our operational systems and services, identify mechanisms to address technological access concerns. | IDOH Program Area |
| Objective 2.4 | | |
| Ensure effective and ongoing partner communication by increasing opportunities to connect with local health departments and collaborative partners group. | | Owner(s) |
| 1 | Develop a comprehensive assessment of Indiana's local health departments that analyzes their delivery of public health services and captures potential areas of improvement in the state. | Office of Public Health Performance Management Office of Public Affairs |
| 2 | Ensure each position in the agency has an SOP and identified back up(s). | Office of Public Health Performance Management IDOH Program Leads |

| | | Owner(s) |
|---|--|--|
| 3 | Create a network of agency representatives who can serve as a centralized point of contact for external customers requesting information or resources for developing community action teams. | IDOH Program Leads Office of Public Health Performance Management |
| 4 | Create, update, and maintain a local health department contact list and ensure this list includes the local health officer, primary and secondary contact information, and associated roles. | Office of Public Affairs |
| 5 | Ensure each position in the agency has an SOP and identified back up(s). | State Personnel Department IDOH Program Leads |

GOAL 3. OPERATIONAL EXCELLENCE. Improve staff, customer, and partner experiences with consistent, efficient, effective, and data-driven services and work processes.

| Objective 3.1 | | |
|--|--|--|
| Develop support systems within the agency to maximize the work completed by divisions and program areas. | | Owner(s) |
| 1 | Promote continuous evaluation of internal operational support systems to identify opportunities for these teams to modernize and adapt their systems. | Office of Public Health Performance Management |
| 2 | Work with SPD to promote the use of SuccessFactors in the agency for employee relationships, staff development, and succession planning within the agency. | State Personnel Department |
| 3 | Increase brand recognition and awareness for the agency both internally and externally. | Office of Public Affairs IDOH Program Leads |
| 4 | Achieve PHAB accreditation by end of 2021 and maintain continuous compliance with PHAB accreditation standards. | Office of Public Health Performance Management |
| Objective 3.2 | | |
| Implement refined feedback loops and mechanisms that will gather internal data and continuously improve the agency's internal processes. | | Owner(s) |
| 1 | Modernize our operations and communication assets to ensure that we are communicating the right message, both internally and externally, at the right time, to the right audience. | Office of Public Affairs Office of Public Health Performance Management Executive Leadership |
| 2 | Increase opportunities for staff to provide real-time, asynchronous, and anonymous input on operational improvements that do not rely on the supervisory chain, through town halls, open houses, think tanks, and anonymous surveys. | Office of Public Affairs Office of Public Health Performance Management Executive Leadership |
| 3 | Ensure and maintain an organizational directory outlining the agency at the divisional and programmatic levels. | IDOH Supervisors and Managers Office of Public Health Performance Management |
| 4 | Implement consistent processes to regularly review policies and procedures to ensure compliance and effectiveness. | IDOH Supervisors and Managers Office of Public Health Performance Management |
| 5 | Evaluate the onboarding experience and implement continuous improvements. | Office of Public Health Performance Management |

| Objective 3.3 | | |
|---|---|--|
| Embed a culture of quality in our agency operations by increasing the number of trainings and resources provided to the agency on continuous quality improvement. | | Owner(s) |
| 1 | Create intentional, agency -wide messaging to promote a Culture of Quality where staff learns to improve the things within their control and encourage communication on how to address the barriers they face in their roles. | Office of Public Health Performance Management Quality Improvement Team Office of Public Affairs |
| 2 | Leverage the Quality Improvement Team to implement short -term, voluntary problem-solving teams for seemingly intractable issues. | Office of Public Health Performance Management Quality Improvement Team |
| 3 | Celebrate successes of quality improvement projects within the agency to highlight areas of opportunity and replication across program areas. | Office of Public Health Performance Management Quality Improvement Team |
| 4 | Help staff learn the realities of project planning through the implementation of action steps, barrier identification, and scoping. | Office of Public Health Performance Management Quality Improvement Team |

GOAL 4. ORGANIZATIONAL CAPACITY. Attract and retain a dedicated, knowledgeable, and diverse workforce to support strong public health outcomes in Indiana.

| Objective 4.1 | | |
|--|---|---|
| As an agency, provide all levels of staff opportunities and means to cultivate talent and encourage workforce diversity. | | Owner(s) |
| 1 | Train and hold agency leaders accountable to have conversations with their staff about succession planning and exploring potential avenues to advance within the agency. | IDOH Supervisors and Managers |
| 2 | Create an agency index of qualifications, certifications, and skills per employee that could be referenced when opportunities arise outside of their daily job duties as an appendix to our Continuity of Operations Plans. | State Personnel Department Division of Emergency Preparedness IDOH Supervisors and Managers |
| 3 | Create a mechanism to track the number of IDOH Internships that result in new agency talent. | Office of Public Health Performance Management State Personnel Department |
| 4 | Increase the utilization of employee resources, such as LinkedIn Learning, IN-TRAIN, and SuccessFactors Learning for skill development, coaching, and growth. | State Personnel Department Office of Public Health Performance Management |

| | | |
|---|--|--|
| 2 | Increase the proportion of interns who set public health competency goals and indicate they increased their knowledge and understanding of the identified public health competencies. | IDOH Program Leads Office of Public Health Performance Management |
| Objective 4.2 | | |
| Ensure that all agency staff is awarded opportunities for leadership development and mentorship every month within the workplace. | | Owner(s) |
| 1 | Throughout 2021, create a mentorship program that matches a mentee and mentor based on job classification. | Office of Public Health Performance Management |
| 2 | Provide supervisors and managers monthly opportunities to expand their managerial expertise for supervising staff, applying policies in the workplace, and having crucial conversations. | Office of Public Health Performance Management State Personnel Department |
| 3 | Maintain and expand the platforms (i.e. via in-person, online, and virtual) in which workforce development trainings are provided to staff. | Office of Public Health Performance Management State Personnel Department |
| 4 | Provide leadership the opportunity and skills to apply the results of the Culture and Climate Survey into actual practice. | Office of Public Health Performance Management |
| Objective 4.3 | | |
| Increase staff's feeling of trust, communication, and respect as measured by the staff engagement survey. | | Owner(s) |
| 1 | Strive to educate staff on the interconnectedness of all types of staff and how their roles fit and support the agency's mission and vision. | IDOH Supervisors and Managers |
| 2 | Create opportunities to highlight employee engagements, including but not limited to national rankings or seats, external presentations, and academic publishing. | Office of Public Affairs Office of Public Health Performance Management Executive Leadership |
| 3 | Operationalize internal communications channels specifically designed for recognizing exemplary work at all levels. | Office of Public Affairs Office of Public Health Performance Management Executive Leadership |
| 4 | Continue to work with the engagement team to identify opportunities to recognize and improve staff experiences within the agency. | Office of Public Health Performance Management Employee Engagement Team |

| Objective 4.4 | | |
|---|--|--|
| Retain current staff expertise by reducing the turnover of employees, excluding promotion and retirement. | | Owner(s) |
| 1 | For key job types, re-benchmark salary ranges in partnership with the State Personnel Department and the State Budget Agency as budgets allow. | State Personnel Department Executive Leadership |
| 2 | Use exit surveys to identify areas of opportunity and inform management of potential barriers in the employee lifecycle. | State Personnel Department IDOH Supervisors and Managers |
| 3 | Administer the Engage survey and the Culture and Climate Survey and use the results to inform initiatives to reduce turnover and increase employee satisfaction. | Office of Public Health Performance Management |
| 4 | Develop strategies at the Commission level to operationalize the agency-level data on retention and employee experience. | Office of Public Health Performance Management |
| 5 | In conjunction with the Engagement Team, hold an Appreciative Inquiry summit focused on the development of strengths-based solutions to retention and employee satisfaction. | Office of Public Health Performance Management Employee Engagement Team IDOH Executive Leadership |

GOAL 5. FINANCIAL STEWARDSHIP AND SUSTAINABILITY. Improve financial infrastructure, management, and data-informed decision making.

| Objective 5.1 | | |
|---|--|-------------------------------------|
| Enhance the speed and accuracy of finance functions and communicate realistic expectations by increasing Finance-based resources for staff. | | Owner(s) |
| 1 | Create a timeline of events for agency staff to reference that outlines Finance's peak seasons so programs can avoid submitting requests or procurements at that time. | Finance |
| 2 | Improve the financial process-change documentation and communication . | Finance |
| 3 | Examine the approval matrix for contract agreements and identify areas of opportunity to reduce steps and time. | Finance Quality Improvement Team |
| 4 | Consider centralization and standardization of billing processes for external partners and vendors. | Finance Quality Improvement Team |
| 5 | Explore the feasibility of a "reconciliation unit" to identify overpayments, collections, or duplicate billings. | Finance |
| 6 | Modernize our processes to electronic-based and reduce our paper-based processes. | Finance |
| 7 | Standardize the distribution of monthly programmatic standing and annual review reports to ensure programs are accurately tracking their spending. | Finance IDOH Program Leads |
| 8 | Fully support and maximize implementation of the new Human Resources and Payroll system to promote self-service functionality and reduce transaction timelines. | Finance |

| Objective 5.2 | | |
|---|--|--|
| Optimize management of grant funds and programs by implementing measures that diversify the agency's funding sources. | | Owner(s) |
| 1 | Examine and expand the use of best practices in sub-recipient monitoring, including clarification of roles between program and finance staff, and additional training and standardization of both programmatic and financial monitoring. | Finance IDOH Program Leads |
| 2 | By 2022, the department will explore an embedded Revenue Cycle Unit (RCU) to provide direct support to local health departments. | Finance IDOH Program Leads |
| 3 | Regularly evaluate licensure fees to ensure that they offset the cost of licensure administration in Indiana. | Finance IDOH Program Leads |
| 4 | Beginning in June 2020, the IDOH Finance Division in partnership with the Family Social Services Administration (FSSA) will investigate systematic ways to maximize the cost allocation for charging Medicaid to reduce administrative burden while increasing the agency's revenue. | Finance Long Term Care FSSA |
| 5 | Evaluate the need to establish dedicated funds to collect user fees and other revenue to directly link revenue and expenditures in discrete cost centers. | Finance Legislative Affairs |
| 6 | Create an interactive repository of grant opportunities for the agency where programs can identify available opportunities, connect with staff experienced in grant writing, and create internal partnerships. | Finance IDOH Program Leads IOT/OTC |
| Objective 5.3 | | |
| Maximize all available funding through information sharing and clear communication through the creation and continuous review of an internal dashboard. | | Owner(s) |
| 1 | Classify contracts and grants into comprehensive programs of work so disparate funding sources and projects can be braided together for maximum effect. | Finance IDOH Program Leads |
| 2 | Monitor underspending and identify flexibility or applicability of funds to related priority areas and communicate opportunities for resource-sharing. | Finance IDOH Program Leads |
| 3 | Conduct a yearly review of existing fee schedules and rebase them to account for administration, overhead, and other costs. | Finance IDOH Program Leads |
| 4 | By midyear 2021, internal stakeholders including but not limited to Finance, the Office of Legal Affairs, and Local Health Department Outreach will create contract and grant language that discourages the supplementation of local funds. | Finance Office of Legal Affairs Office of Public Affairs Executive Leadership |
| 5 | Examine common demerits in rejected grant applications and opportunities to build capacity to address those weaknesses and quantify the impact for future applications. | IDOH Program Leads Quality Improvement Team Finance |

Appendix II - Staff Contributions & Acknowledgments

2020 Strategic Planning Committee

| Name | Department | Role |
|-----------------------|--|---------------------------------|
| Adam Green | State Laboratory | Front Line Staff |
| Alicia Earnest | Epidemiology Resource Center | Manager |
| Andrienne Durham | Minority Health | Manager |
| Ann Alley | Chronic Disease, Rural Health, Primary Care | Manager |
| Antoniette Holt | Office of Minority Health | Manager |
| Brent Anderson | Chronic Disease, Rural Health, Primary Care | Front Line Staff |
| Casey Kinderman | Maternal Child and Health | Supervisor |
| Chris Greeney | Long Term Care | Field Staff Supervisor |
| Cody Talley | HIV/STD/VH | Front Line Staff |
| Dandy Garcia | HIV/STD/VH | Front Line Staff |
| Greta Sanderson | Public Affairs | Supervisor |
| Jeremy Turner | HIV/STD | Manager |
| Jill King | Immunizations | Field Staff Manager |
| Katelin Rupp | Tobacco Prevention and Cessation | Manager |
| Kimberly Bentley | Office of Minority Health | Front Line Staff |
| Kimberly Rief | Health and Human Services Commission | Administrative Front Line Staff |
| Kristen Kearns | Finance | Manager |
| Kristine Etter | Center for Deaf and Hard of Hearing Education | Front Line Staff |
| Lauren Milroy | Epidemiology Resource Center | Front Line Staff |
| Marie Hitze | Emergency Preparedness | Front Line Staff |
| Molly Chamberlin, PhD | Chamberlin & Dunn Associates | External Contractor |
| Nicole Dunn | Chamberlin & Dunn Associates | External Contractor |
| Nicole Morley | Office of Public Health Performance Management | Supervisor |
| Patricia Truelove | Office of Public Health Performance Management | Front Line Staff |
| Paul Krievins | Lead and Healthy Homes | Supervisor |
| Robyn Porter | Office of Technology and Compliance | Front Line Staff |
| Shirley Payne, PhD | Children's Special Health Care Services | Manager |

The Strategic Plan Committee would also like to thank the additional supporters we had throughout this process. These individuals assisted with providing feedback throughout the process and facilitating crucial conversations.

Executive Team

| | |
|-------------------------|--|
| Kristina Box, MD, FACOG | State Health Commissioner |
| Lindsay Weaver, MD | Chief Medical Officer |
| Pam Pontones | Deputy State Health Commissioner; State Epidemiologist |
| Shane Hatchett | Chief of Staff |

Public Health Performance Management

| | | |
|-------------------|--|------------------|
| Barbara Killian | Regulatory and Compliance Coordinator | Front Line Staff |
| Eric Beers | Workforce Development Coordinator | Front Line Staff |
| Nicole Morley | Director of Public Health Performance Management | Supervisor |
| Patricia Truelove | Accreditation Coordinator | Front Line Staff |

Accreditation Team

| | | |
|----------------------|------------------------------------|------------------|
| Alicia Earnest | Epidemiology Resource Center | Front Line Staff |
| Carla Brown | Child Fatality Review & Prevention | Front Line Staff |
| Kate Etter | Lead & Healthy Homes | Manager |
| Laura Chavez | Women, Infants, & Children | Manager |
| Morgan Sprecher | Trauma & Injury Prevention | Front Line Staff |
| Shelby Royster | Women, Infants, & Children | Front Line Staff |
| Amy Kent | Legislative Affairs | Supervisor |
| Gretchen Martin | Child Fatality Review & Prevention | Supervisor |
| Kelly Cunningham | Child Fatality Review & Prevention | Front Line Staff |
| Mary Henrikson | Women, Infants, & Children | Front Line Staff |
| Naima Gardner | Nutrition & Physical Activity | Supervisor |
| Tasha Smith | Vital Records | Manager |
| Andrew Pappas | Environmental Public Health | Supervisor |
| John Nichols | HIV/STD/VH | Manager |
| Larry Stribling, Jr. | HIV/STD/VH | Manager |
| Mike Sutton | Environmental Public Health | Front Line Staff |
| Nona Mahari | Women, Infants, & Children | Front Line Staff |

We would also like to extend a special thanks to our partners and external stakeholders for their ongoing feedback, participation in crucial conversations, involvement in our key informant interviews, and for taking our external SWOT Assessment.

Strategic Plan Contractors:

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Director and Co-Founder

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Nicole Dunn

Director and Co-Founder

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External Partners and Stakeholders:

Aids Ministries

Indiana Minority Health Coalition

American Diabetes Association

Indiana Oral Health Coalition

ASTHO

Indiana Public Retirement System

Bashor

Indiana State Department of Agriculture

Community Health Clinic

Indiana United Ways

Community Solutions Inc.

Indiana University School of Dentistry

Concord Center

Indiana University School of Public Health
(Bloomington)

CTSI- Cardiovascular & Diabetes Coalition
of Indiana

Indiana Professional Licensing Agency

Department of Child Services

IPRO ESRD Network 9

Emerald Consulting

Indiana University Health

Family Social Services Administration (FSSA)

Indiana University School of Medicine-

GlaxoSmithKline

Ivy Tech

Goodwill Nurse Family Partnership

JumpIN for Healthy Kids

Health By Design

March of Dimes

Health Care Education & Training

Marion County Dept of Health

Hear Indiana

Myers and Stauffer

Indiana Addiction Issues Coalition

Positive Resource Connection

Indiana Dental Association

Purdue University

Indiana Department of Environmental
Management

Purdue University Audiology Clinic

Indiana Department of Revenue

RO-CMS

Indiana Hands and Voices

RO-CMS (Chicago)

Indiana Hemophilia and Thrombosis Center

The Health Foundation of Greater Indianapolis

Indiana Hospital Association

Viral Hepatitis Informatics Epidemiologist

Indiana Immunization Coalition

Wellness Council of Indiana

Indiana Manufactured Housing Association

YMCA of Central Indiana, Top 10 Coalition

Indiana University - Fairbanks Richard M Fairbanks
Foundation

Richard M Fairbanks School of Public Health Indiana
Dental Association

Indiana University School Of Medicine

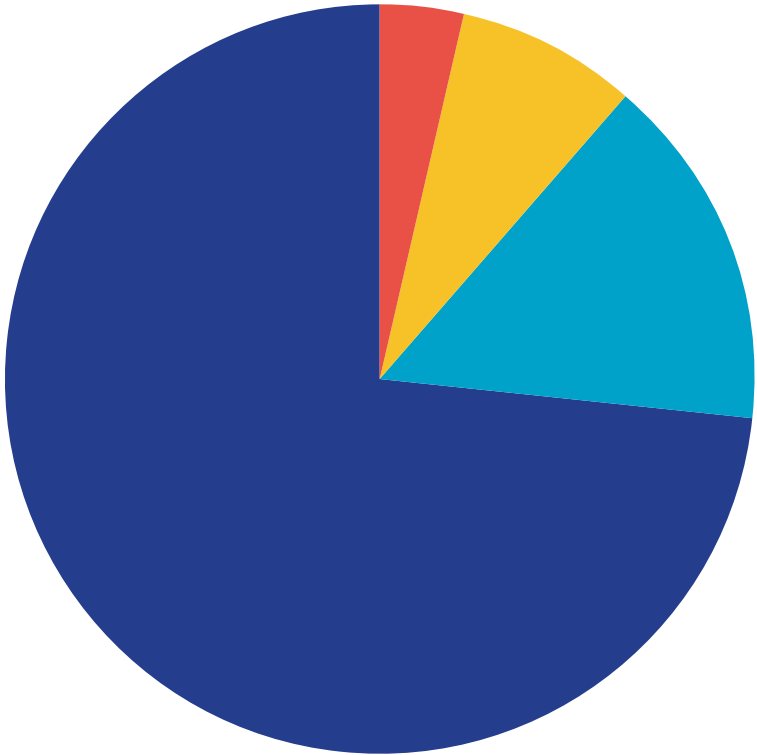
Native American Indian Affairs Commission Indiana
State Medical Association

Appendix III - Vision and Value Survey Summary

Accreditation Team

561 Participants

| | |
|--------------|-----|
| Executive | 21 |
| Managers | 44 |
| Supervisors | 85 |
| Direct Staff | 408 |



Appendix IV - SWOT: Strengths, Weaknesses, Opportunities, and Threats

Summary of SWOT

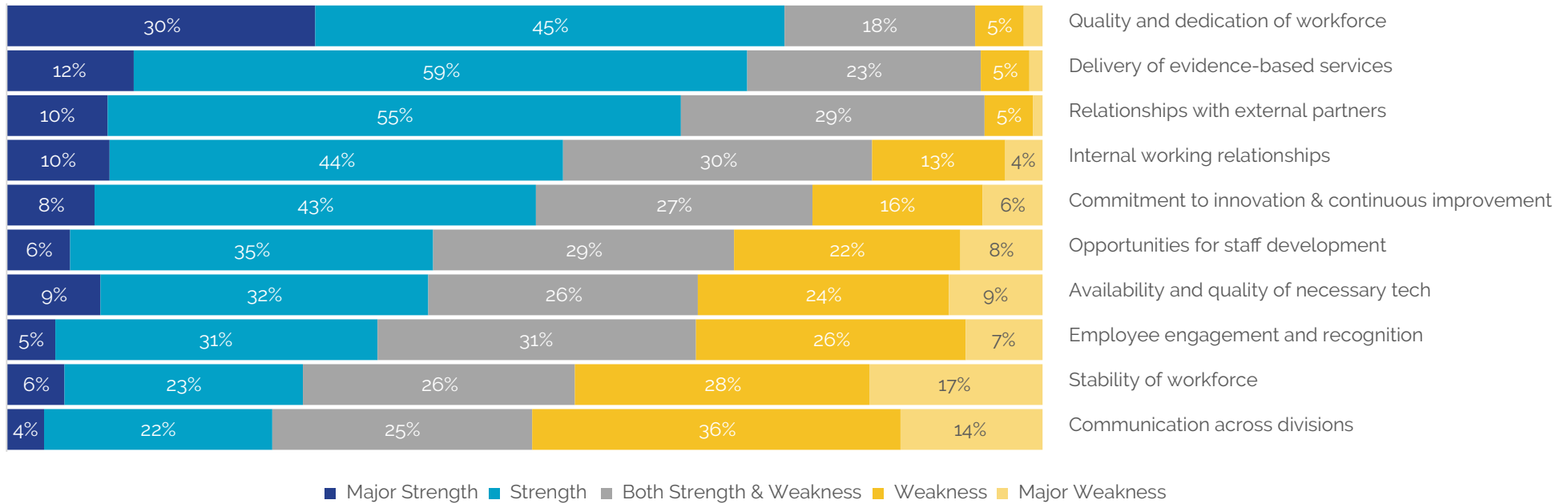


Priority themes are listed in order of frequency, and percentages are based on total number of responses related to that theme divided by total number of priority responses (1,084).

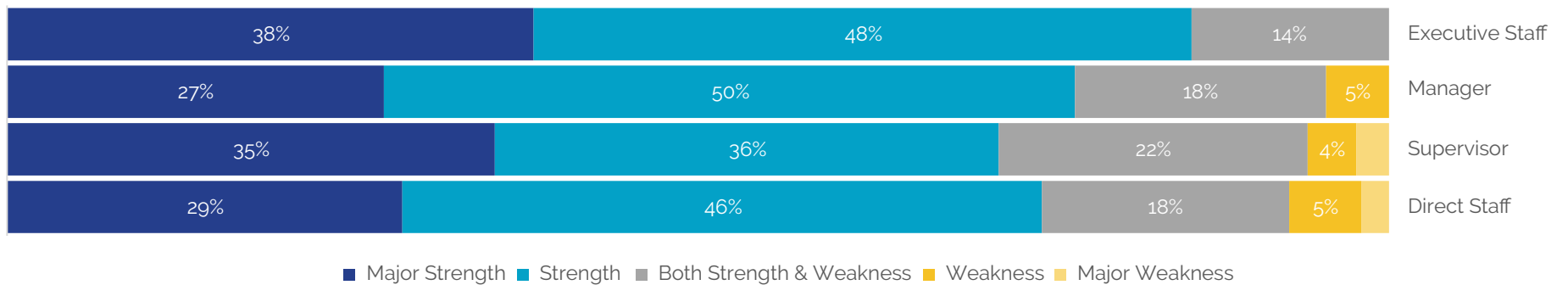
| Priority Theme | Priority Subthemes (total number of responses) |
|--|---|
| <p>Commitment to innovation, quality, and improvement (30%) Total of 330 related responses</p> | <p>Health equity (109)</p> <p>Public health and wellness (in general) (72)</p> <p>Specific health-related issues (56)</p> <p>Emergency preparedness/pandemic response (49)</p> <p>Evidence-based practices (44)</p> |
| <p>Employee engagement, recognition, and non-compensation related benefits (21%) Total of 225 related responses</p> | <p>Opportunities for recognition and input (85)</p> <p>Staff development opportunities (59)</p> <p>Supportive resources (54)</p> <p>Flexibility (27)</p> |
| <p>Internal working relationships and processes (19%) Total of 201 related responses</p> | <p>Improved transparency and collaboration (125)</p> <p>Process improvements (55)</p> <p>Consistent implementation of policies/procedures (21)</p> |
| <p>Workforce stability and quality (17%) Total of 187 related responses</p> | <p>Improved compensation (69)</p> <p>Staff attraction and retention (60)</p> <p>Building staff capacity and knowledge (28)</p> <p>Contract employment (22)</p> <p>Diversity (8)</p> |
| <p>Relationships with external partners and stakeholders (9%) Total of 101 related responses</p> | <p>Increasing information sharing (46)</p> <p>Strengthening partnerships (33)</p> <p>Improved community engagement (22)</p> |
| <p>Financial Health (4%) Total of 40 related responses</p> | <p>Ensuring adequacy of funding (30)</p> <p>Diversifying funding sources (5)</p> <p>Equitable allocation of resources (5)</p> |

Strengths and Weaknesses

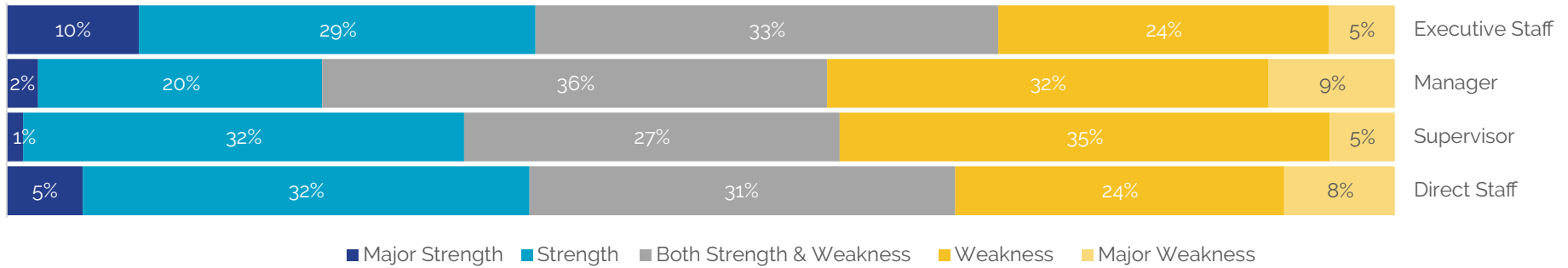
Perceptions of Strengths and Weaknesses



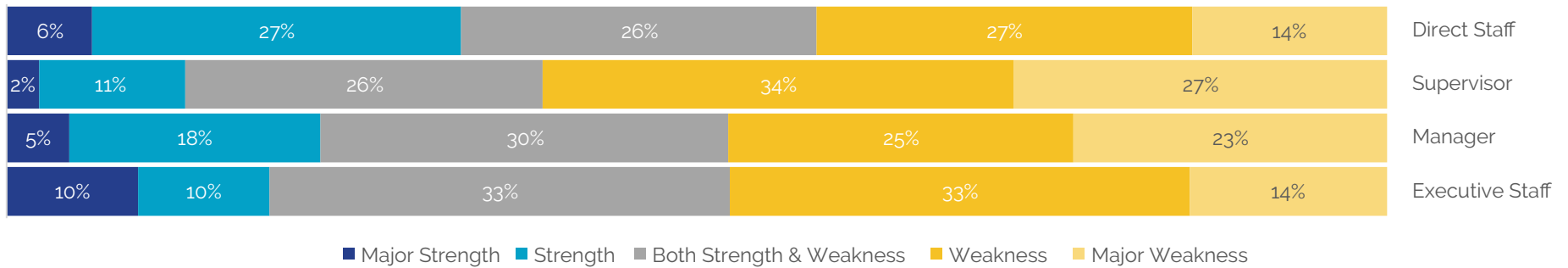
Quality & Dedication of Workforce



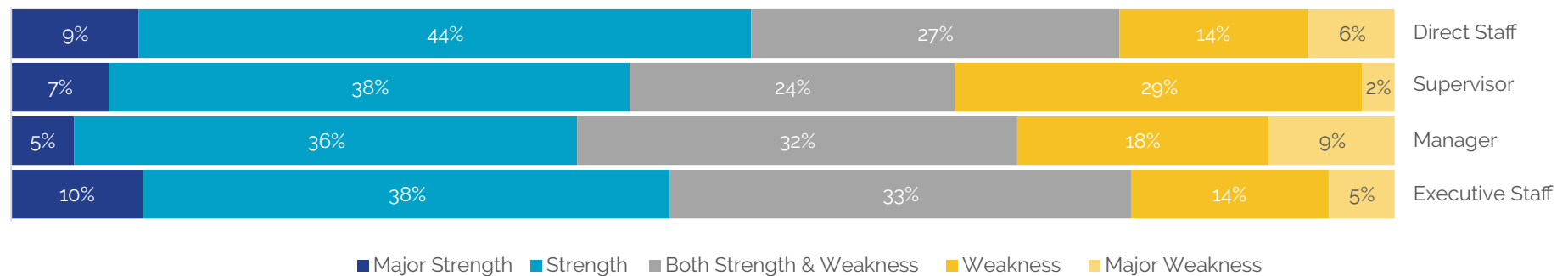
Employee Engagement & Recognition



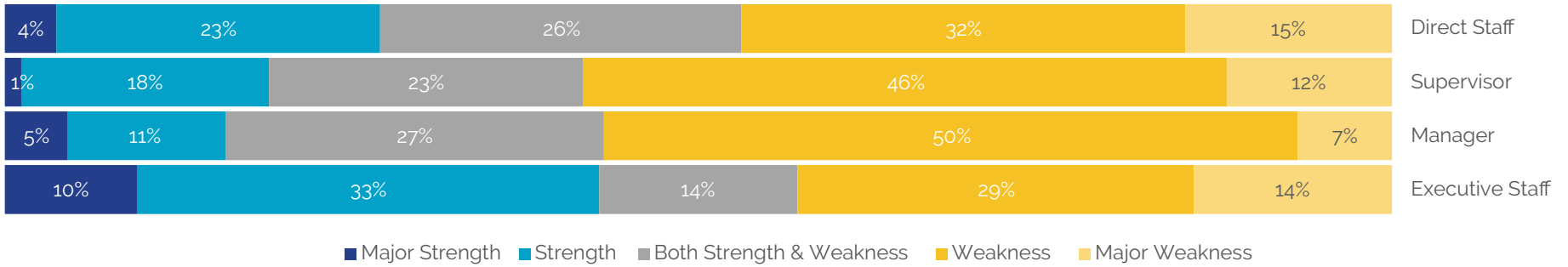
Stability of Our Workforce



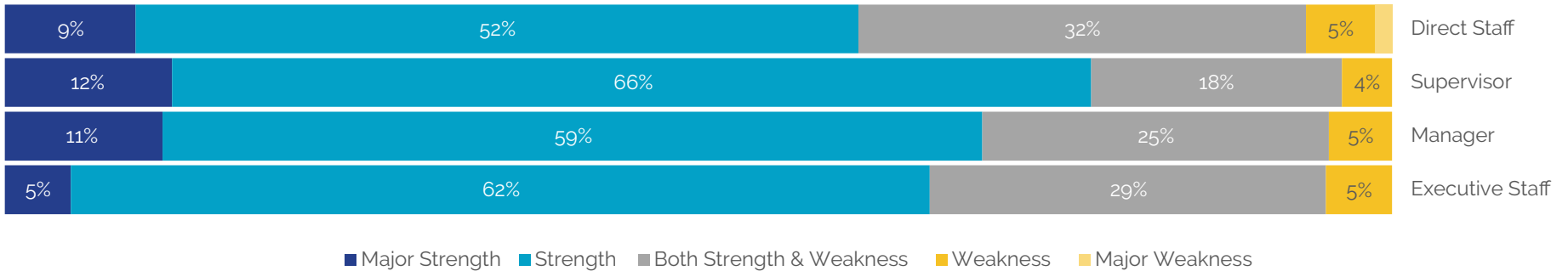
Commitment to Innovation and Continuous Improvement



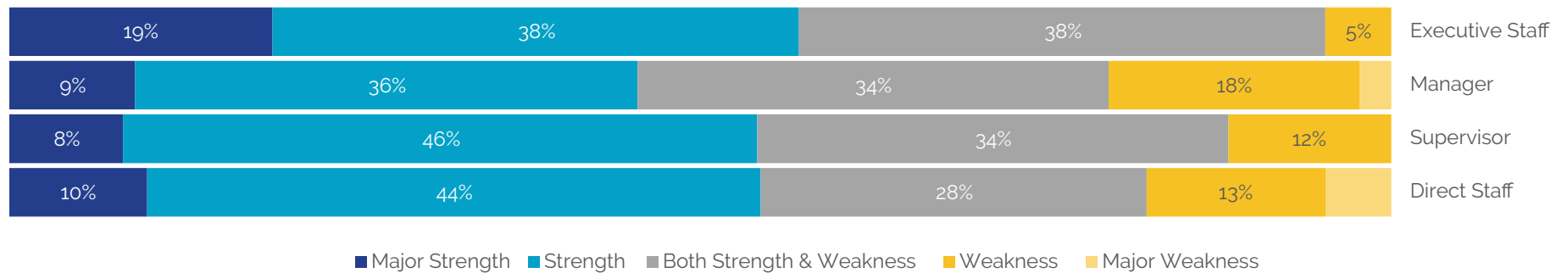
Communication Across Divisions



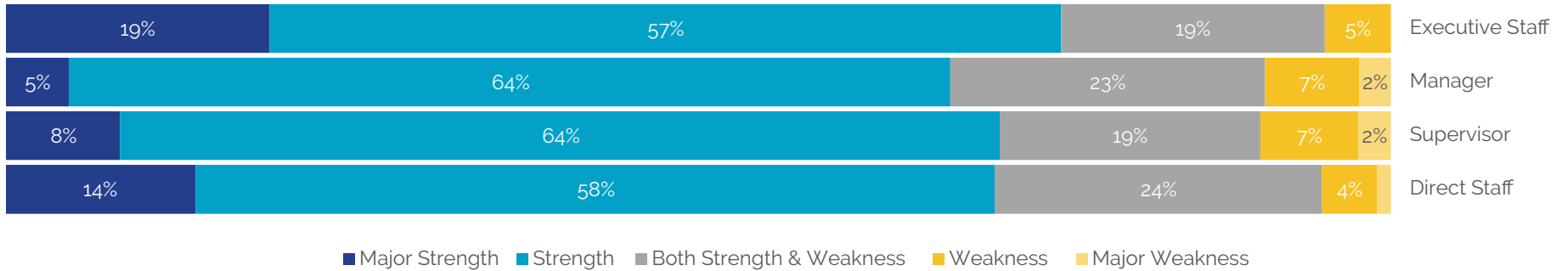
Relationships with External Partners



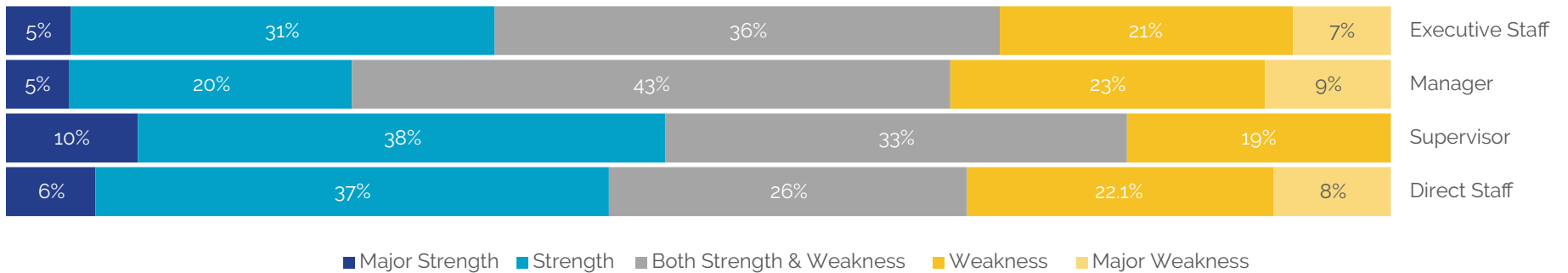
Internal Working Relationships



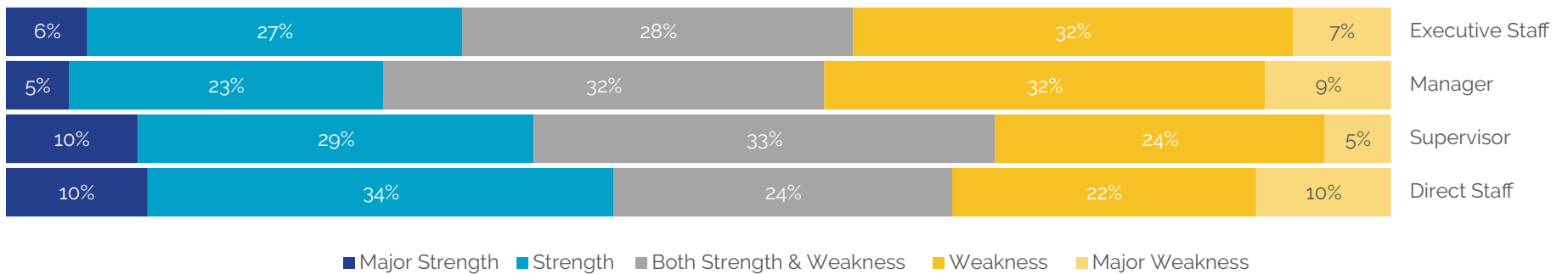
Delivery of Evidence-based Services



Opportunities for Staff Development

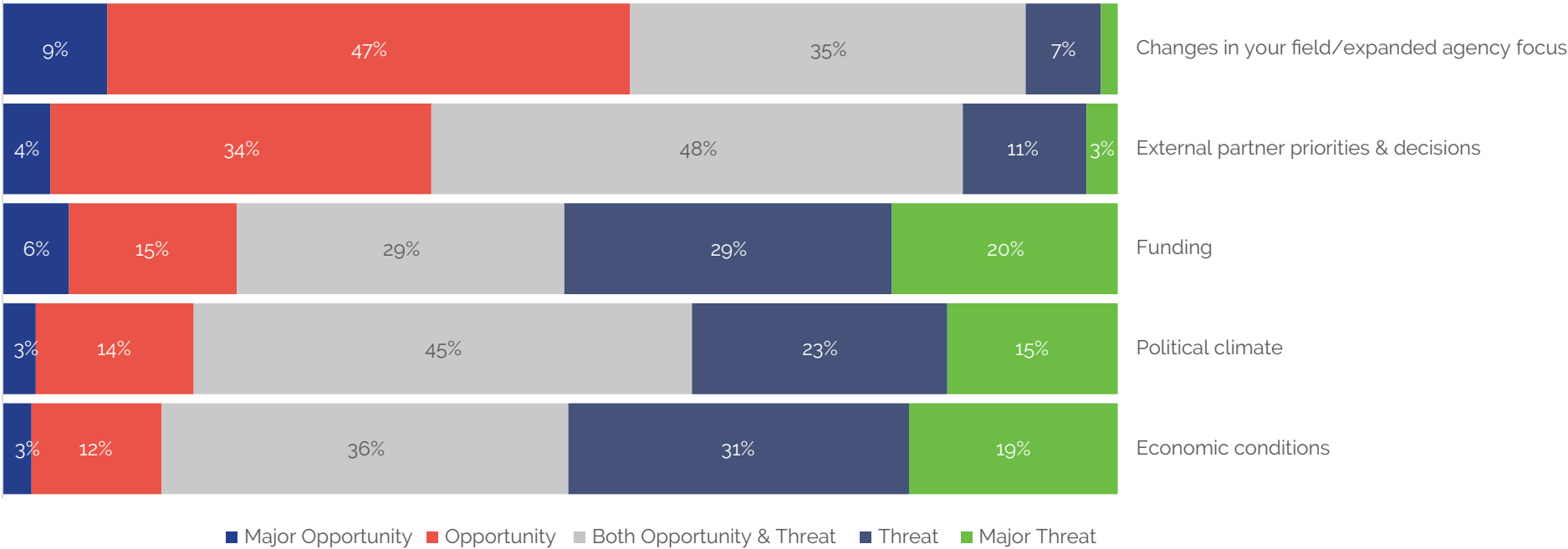


Availability and Quality of Necessary Technology

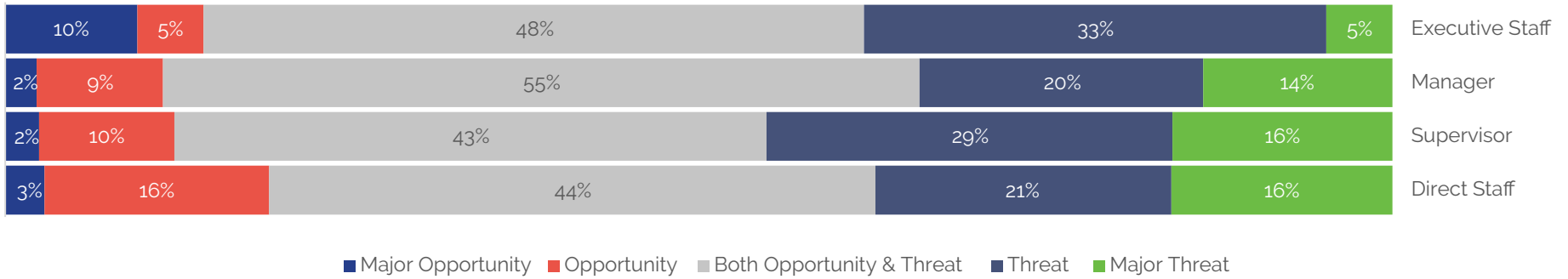


Opportunities and Threats

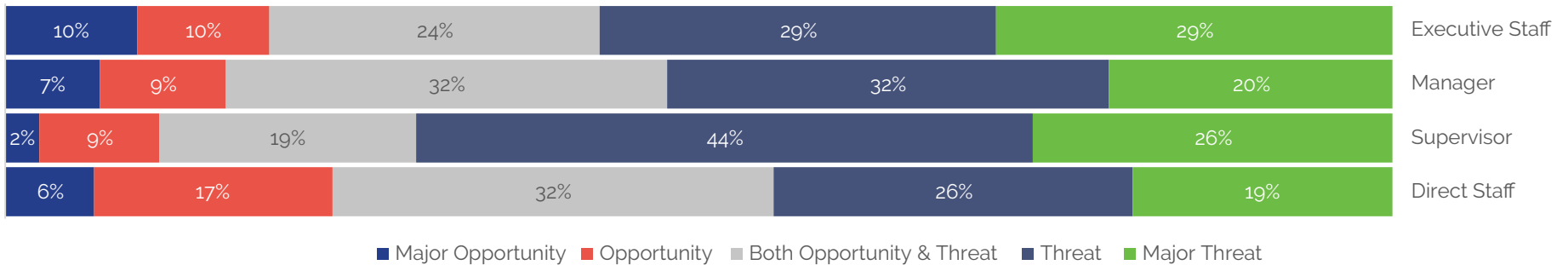
Perceptions of Opportunities and Threats



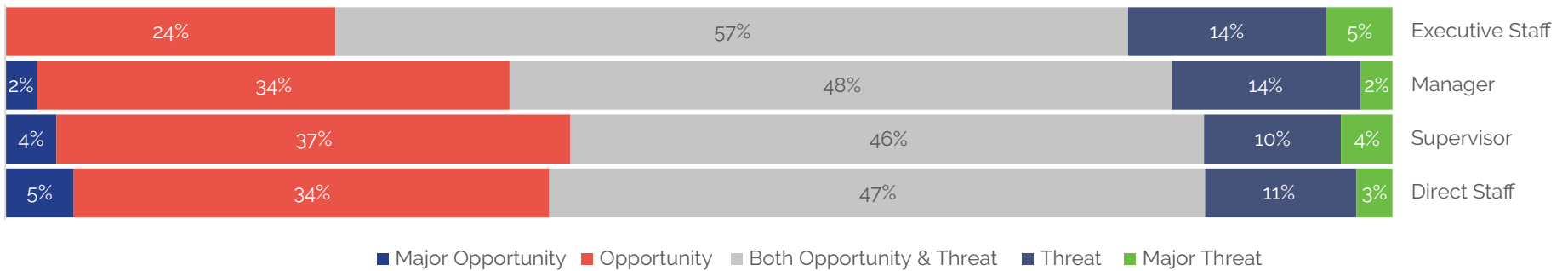
Political Climate



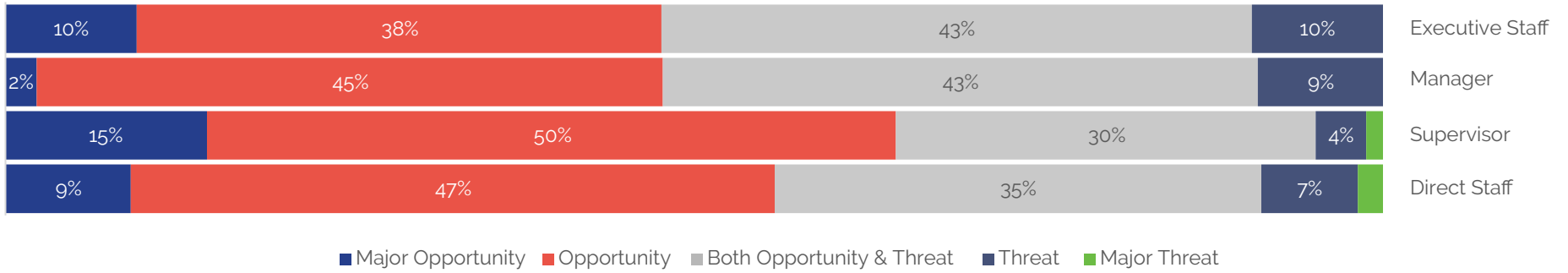
Funding



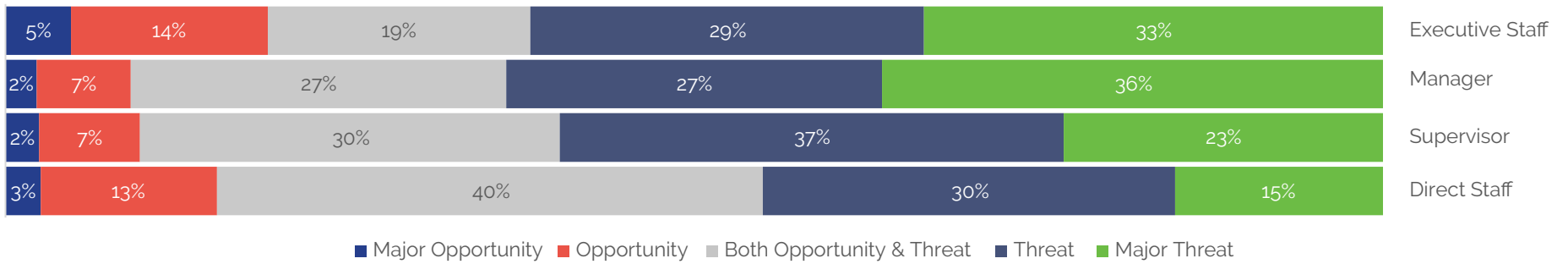
External Partner Priorities & Decisions



Changes in Field / Expanded Agency Focus



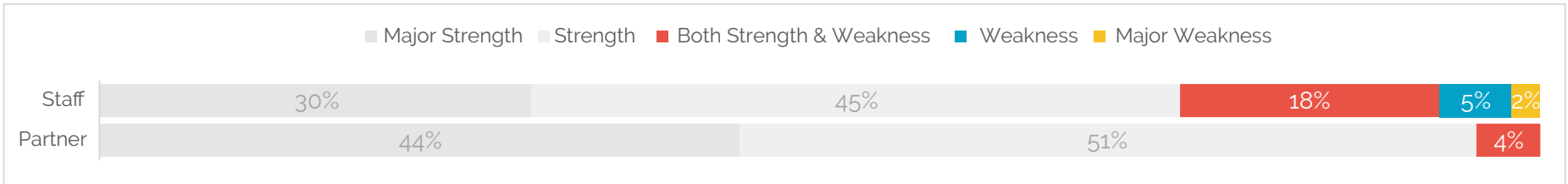
Economic Conditions



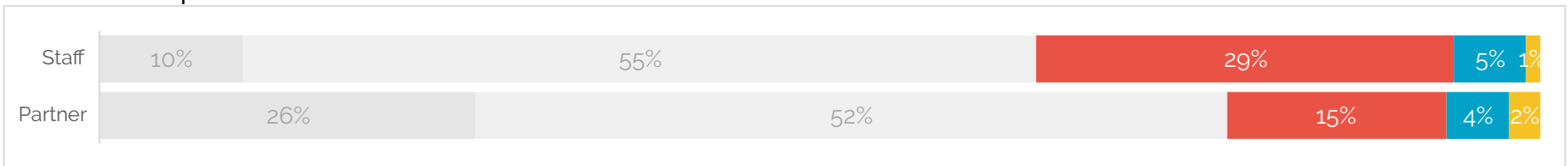
An important part of IDOH's SWOT analysis was to survey both staff and our partners. The results for Strengths and Weaknesses were as follows:

- Staff and partners rated the S/W items in the same order.
- Although staff as was mostly positive on all items, partners were somewhat more positive than staff.
- Internal items (S/W) were rated more positively than external (O/T).

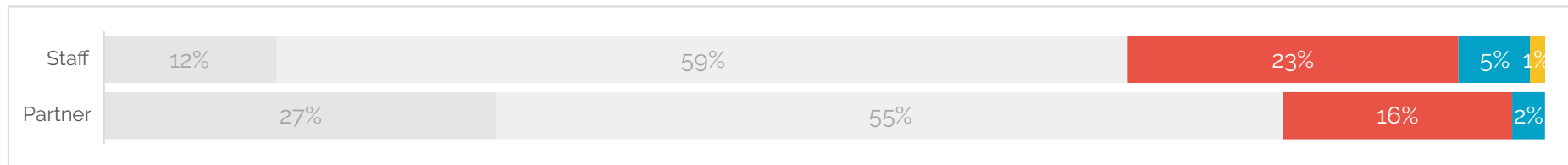
Quality & Dedication of the ISDH Workforce



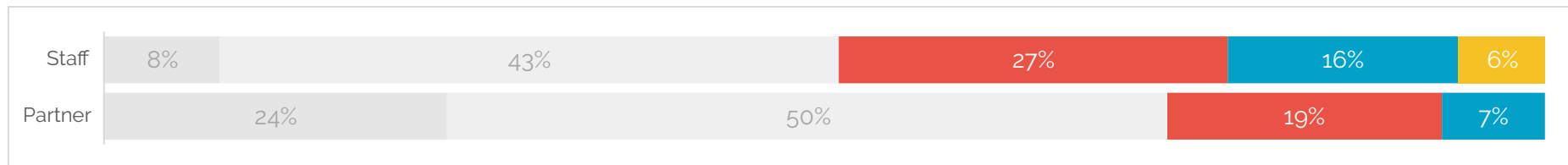
Relationships with External Partners



Delivery of Evidence-based Services



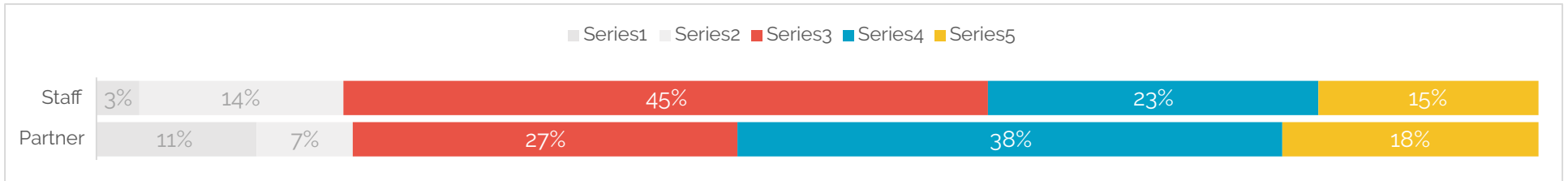
Commitment to Innovation & Continuous Improvement



An important part of IDOH's SWOT analysis was to survey both staff and our partners. The results for Opportunities and Threats were as follows:

- Staff and partners rated the O / T items in almost the same order.
- Responses were mixed and were significantly more negative than S/W items.
- Partners rated all items more negatively (major threat/threat) than staff-staff saw more as "both" O and T.

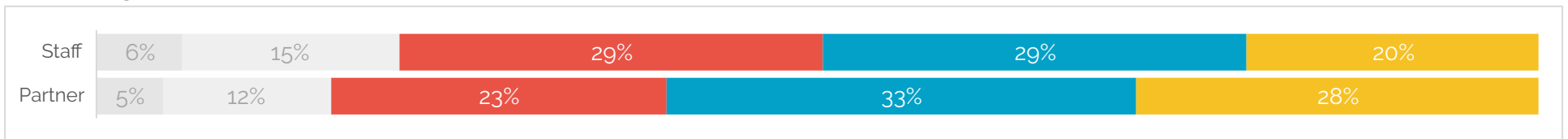
External Partner Priorities & Decisions



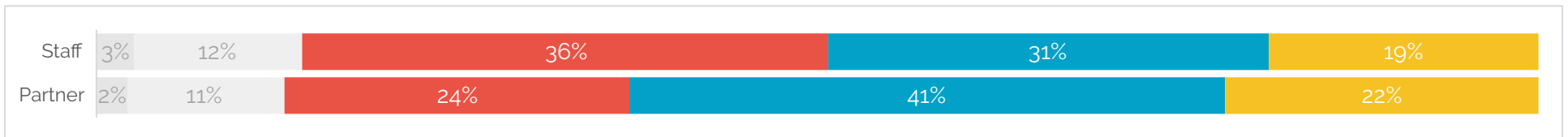
Political Climate



Funding



Economic Conditions



Differences in Perceptions by Staff Category

Ranking (by percentage) for Strength/Opportunity

Highest
 Second highest
 Third highest
 Fourth highest

