

A good mind. A good heart. A strong fire.

# 2021-2023 Strategic Plan

**Community Health Services** 



# **Strategic Plan** Oneida Community Health Services Department

## APPROVALS

### Review Due: Annual after last signature

Debug Duffer avea	Digitally signed by Debra J. Danforth RN, BSN Date: 2021.06.22 12:49:09 -05'00'
Oneida Comprehensive Health Division Operations	s Director Date
Rewinder Vin	Digitally signed by Ravi Vir Date: 2021.06.23 12:37:20 -05'00'
Oneida Comprehensive Health Division Medical Di	rector Date
Michelle Myers BSN, R	Digitally signed by Michelle Myers BSN, RN Date: 2021.06.14 14:57:41 -05'00'
Community/ Public Health Officer	Date

Submitted by: Community Health Services Departments

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Practical Vision	
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Strategic Directions	
Focused Implementation- by Strategic Direction	
(Current Reality, Success Indicators, 1 <sup>st</sup> Year Accomplishments)	
(SD-1) 90 Day Implementation Plan	19
(SD-2) 90 Day Implementation Plan	20
(SD-3) 90 Day Implementation Plan	21

#### Community Health Services Strategic Planning Teams Sessions February – April 2021

The Strategic Planning parts:

- 1. Environmental Scan
- 2. Practical Vision
- 3. Underlying Contradictions
- 4. Strategic Directions
- 5. Focused Implementation

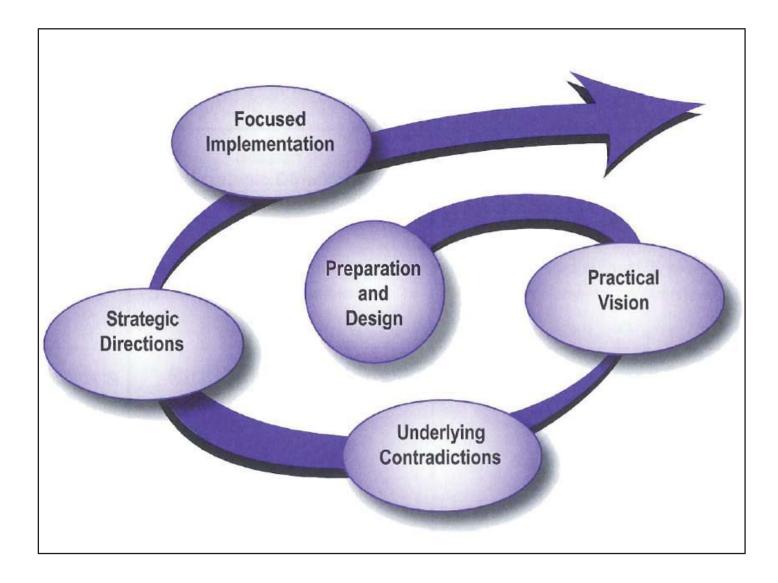
**Workshop Goal:** Empower and support staff in developing and delivering care and services that are responsive to individual and community needs.

Strategic Planning Facilitators: Alyssa Hudak Victoria Flowers

Strategic Planning Participants:

Neva Archiquette	Andrea Kolitsch	Mallory Patton	Carlissa Spreeman
Candi Cornelius	Dawn Krines-Glatt	Tammy Ramirez	Becky Stevens
Maria Danforth	Kristine Labby	Stefanie Reinke	Carol Torres
Tricia Danforth	Hanna Leisgang	Debra Santiago	Kelly Tuszynski
Jo Ann Eland	Carrie Lindsey	Betty Schwantes	Toni Walking Eagle
Louetta Fowler	Heidi McCann	Phyllis Shaline	Barbara Webster
Leah Fuss	Belinda McLester	Beatrice Skenandore	Debbie Danforth
Susan Higgs	Debra Miller	Brittany Skenandore	Ravinder Vir
Samantha Johnson	Michelle Myers	Stacy Skenandore	
Richelle Kaquatosh	Betsy Nickel	Tammy Skenandore	Team member not present:
Char Kizor	Mollie Passon	Tek Skenandore	Rachel Lemke

#### Strategic Planning Model:



# **Environmental Scan**

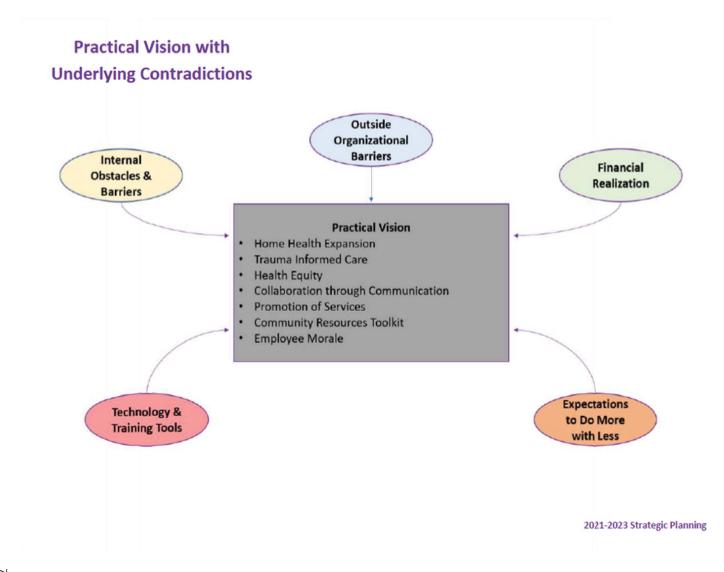
#### CHS staff top answers to these questions:

- 1. What trends are needing to become accepted practices in health care?
- 2. Which trends are gaining more acceptance?
- 3. Which trends are current and accepted as standard procedures?
- 4. Which trends are disappearing or no longer needed?

### 2021 Environmental Scan: Health care trends -what's happening now?



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Awareness of need	COVID-19 Pandemic,	Multi-disciplinary,	Only in-person
for increased Mental	Trauma Informed	collaborative, patient	appointments.
Health, Addiction	Care, LGBTQ	centered care.	
Services and Home	community needs.	Quality customer	
Health.	Health Equity.	service.	
Expanded	Telehealth	Electronic Health	Paper charts.
Technology, health	services.Virtual	Records Disease	Manual processes.
care Apps, for	health/nutrition	surveillance and	
patients and	related education,	investigation,	
providers use	classes.	evidenced- based	
		practice, QA/QI	
Staff-driven job	Workforce	Exercise at work.	Top-down
satisfaction ideas and	flexibility,	Staff training.	leadership.
burnout prevention	telecommuting	Workplace safety.	Overbooked
activities.	options. Increased	Need to re-establish	providers.
	need for staff	monthly meetings.	Career-long
	communication and		employees (baby
	collaboration.		boomers).



# **Strategic Directions**

# Goal: Empower and support staff in developing and delivering care and services that are responsive to individual and community needs

		the course and a
Strengthen Strategic Communication & Collaboration	Market our Services <ul> <li>Market our collaborative department</li> </ul>	<ul> <li>Improve Tribal Collaboration</li> <li>Improve Partnerships with other departments Nation-wide</li> </ul>
Empower our Workforce	<ul> <li>Improve Staff Morale, Retention, and Communication</li> <li>Plan to increase staff longevity</li> <li>Facilitate and encourage staff communication and transparency/safe space</li> <li>Research and find an incentive program &amp;/or funding for one</li> <li>Increase communication between CHS Departments</li> <li>Find a way for all CHS teams to be in one area</li> </ul>	<ul> <li>Facilitate Staff Development &amp; Technology Solutions</li> <li>Professional and personal development training, especially Trauma informed care decisions and technology</li> <li>Coordinate professional development activities</li> <li>Offer technology/website training for staff</li> <li>Identify technology solutions to improve care, communication, and responsiveness</li> </ul>
Expand and Enhance our Services	<ul> <li>Identify Unmet Community Service Needs</li> <li>Solicit feedback and active engagement from the community about needed/desired services</li> <li>Poll the community for their needs/barriers</li> </ul>	Expand Services based on Emerging Needs <ul> <li>Home Health Care</li> <li>Trauma Informed Care</li> <li>Health Equity in Programming</li> </ul>

# Year One Accomplishments by Quarter

Strategic Direction(s)	Qtr 1: Jan – Mar 2021	Qtr 2: Apr – Jun 2021	Qtr 3: Jul – Sep 2021	Qtr 4: Oct – Dec 2021
Strengthen Strategic Communication & Collaboration	Strategic Planning	<ul> <li>SD Team formed.</li> <li>90-Day Implementation Plans in place w/activities to be reported out in July.</li> </ul>	<ul> <li>90-day activities to be reported out in October.</li> </ul>	Increase Facebook engagement by 20%, update staff services guide, and increase collaborations with other Oneida Divisions.
Empower our Workforce	Strategic Planning	<ul> <li>SD Team formed.</li> <li>90-Day Implementation Plans in place w/activities to be reported out in July.</li> </ul>	<ul> <li>90-day activities to be reported out in October.</li> </ul>	Increase staff satisfaction by 10%, utilizing staff driven activities, trainings, and technology solutions.
Expand and Enhance our Services	Strategic Planning	<ul> <li>SD Team formed.</li> <li>90-Day Implementation Plans in place w/activities to be reported out in July.</li> </ul>	<ul> <li>90-day activities to be reported out in October.</li> </ul>	Incorporate health equity and trauma informed care principles into our existing and expanding programs and services.

Quarterly Evaluation and Planning Rhythm January 1, 2021 to December 31, 2021						
Participants	Rational Objective	Experiential Objective	Product/Outcome			
CHS Strategic Direction Teams	n Assess accomplishments and plan for the next perio	C	Clear tasks and roles for the next period			
By April 30, 2021	By July 30, 2021	By October 29, 2021	By January 31, 2022			
Strategic Planning completed and (3) SD Teams formed with 90 Day Implementation Plans in place.	<ul> <li>Quarterly Planning Event         <ul> <li>Review of Vision, Obstacles, and Strategic Directions</li> <li>Evaluation of 90 Day Action Plan: Brainstorm of accomplishments, what didn't get done, blocks, learning, and implications.</li> <li>Plan for next 90 Days: Measurable accomplishments on quarterly timeline, 90-day action plan for each accomplishment.</li> </ul> </li> <li>Report to CHS Team at July 2021 quarterly meeting.</li> </ul>	<ul> <li>Quarterly Planning Event         <ul> <li>Review of Vision, Obstacles, and Strategic Directions</li> <li>Evaluation of 90 Day Action Plan: Brainstorm of accomplishments, what didn't get done, blocks, learning, and implications.</li> <li>Plan for next 90 Days: Measurable accomplishments on quarterly timeline, 90-day action plan for each accomplishment.</li> </ul> </li> <li>Report to CHS Team at October 2021 quarterly meeting.</li> </ul>	<ul> <li>Quarterly Planning Event         <ul> <li>Review of Vision, Obstacles, and Strategic Directions</li> <li>Evaluation of 90 Day Action Plan: Brainstorm of accomplishments, what didn't get done, blocks, learning, and implications.</li> <li>Development of measurable accomplishments for next 12 months on quarterly calendar.</li> </ul> </li> <li>Plan for next 90 Days: Measurable accomplishments on quarterly timeline, 90-day action plan for each accomplishment.</li> <li>Report to CHS Team at January 2022 quarterly meeting.</li> </ul>			
	Time (1-2 hours)	Time (1-2 hours)	Time (2-3 hours)			

# Appendix

- Health Equity in programming and services
- Collaboration between teams-
- Community Vision of Community Health
- Trauma Informed Care

- Promote CHS & service offerings
- Incorporate trauma informed care
- Encourage healthy and balanced work environment, employee health promotion, staff development

# **Practical Vision**

•Growth of Home Health Agency •Trauma Informed Care •Wellness based services for staff

- Improve CHS website to include more info for programs/services
- Increased collaboration and working relationships w/in CHS
- Improve staff knowledge on resources
   within Oneida Nation

•Employee Recognition/Incentives •Additional Resources to better meet

departments

teamwork within the 5 CHS

the needs of the community (ie: Med deliveries, cultural wellness, etc.)

•Communication, collaboration &

#### Practical Vision: What does CHS want to see in place in 3 years as a result of our actions?

Marketing Services	Community Resource Toolkit	Employee Morale	Collaboration through Communication	Health Equity	Trauma Informed Care	Home Health Expansion
Improve CHS websites to include more info for programs/services Promote CHS & service offerings	Improved staff knowledge on resources within Oneida Nation Additional resources to better meet needs of the community	Employee recognition/incentives Wellness based services for staff Healthy and balanced work environment, employee health promotion, staff development	Increase collaboration and working relationships within CHS Communication, collaboration, & teamwork within the 5 CHS departments Collaboration between teams- Community Vision of Community Health	Health equity in programming and services	Trauma Informed Care	Growth of Home Health Agency

2021-2023 Strategic Planning

#### Competing Priorities

- Lack of Staff- staff burnout
- Resistance to change

#### Staffing constraints, work-load increase

- Lag in technology adoption and procurement
- Lack of consensus in mission/goals, change resistance

•Services lost due to Covid •Finances/Money •We don't communicate enough

# Underlying Contradictions

- Financing knowledge/awareness of
- resources financially
- Training Staff
- Staffing

CHS working in silos

- Lack of technology training
- Outside dept restrictions/barriers

#### Underlying Contradictions: What is blocking us from moving toward our vision?

Outside Organizational Barriers	Financial Constraints	Internal Obstacles and Barriers	Technology & Training Tools	Expectations to Do More with Less
Outside Organizational Barriers HRD Process Outside department restrictions/barriers	Financial Constraints Financing- knowledge/awareness of resources financially Finances/money		Technology & Training Tools Training staff Lack of technology training Lag in technology adoption and procurement	

2021-2023 Strategic Planning

- **C). Strategic Directions:** What actions will we take to address the underlying contradictions to move us toward our vision?
- Facilitate and encourage staff communication and transparency, safe space
- Professional and personal development training, esp. Trauma informed care decisions and technology
- Solicit feedback and active engagement from the community about needed/desired services
- Identify technology solutions to improve care, communication and responsiveness

# Strategic Directions

- Welcome open communicationincrease communication between CHS teams/find a way for all teams to be in one area
- Increase more partnerships with other departments organizational wide.
- Offer technology/website training for staff so that at least one staff from each team has access to website

- Plan to increase staff longevity
- •Coordinate professional development activities
- •Market our Collaborative Departmenttransparency
  - Increase communication between
    CHS Departments (ie: more meetings
    CHS as a whole)
    Poll the community for their
  - needs/barriers
    •Research and find an incentive
  - program &/or funding for one

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STRENGTHENING STRATEGIC COMM	IUNICATION & COLLABORATION (S	D1)
Current Reality	Success Indicators	1 <sup>st</sup> Year Accomplishments
Covid activities keeping staff busy	Other departments know what CHS does	Increase Facebook engagements by 20%, Update staff services guide, and
Previous marketing work was done	Staff making appropriate referrals	Increase collaborations with other Oneida
Some services are not currently offered	Positive feedback	Divisions.
Staff unaware of how to make referrals to other programs	Multiple avenues of communication	
Staff unaware of ADRS resource	Consistent messaging about available services	
Covid has increased some inter- departmental collaborations	Routine updates to Facebook and webpage	
Communications tend to focus on Covid	More efficient understanding of and use of tribal internal resources	
	Maintaining an internal resource guide with program contacts	
	Use of the resource manual by OBH	
	Formal partnership meetings like CHIP	
	Community members' needs met	
TEAM: Tricia, Maria, Mollie, Barb, Dawn, Ma	illory, Richell, Belinda, Betty, Alyssa, Carrie,	Debbie
EMPOWER OUR WORKFORCE (SD2)		
Communication is often fragmented	Monthly CHS newsletter	Increase staff satisfaction by 10% utilizing
Our 5 teams are scattered in different areas/locations	CHS message board	staff driven activities, trainings, and technology solutions.
Limited understanding of roles of other departments	Effective teams that communicate with all depts	
Irregular all staff CHS meetings	Longevity and growth of current employees	
Busy day-to-day responsibilities	Positive satisfaction survey	
Morale is low d/t lack of communication	High participation in workforce wellness activities	
Stressed	Fully staffed	
Positive outlook	Happy staff	
Great working relationships	Employees feel appreciated and want to continue to work in Community Health Services	
Budget constraints for advancement of technology, training, and development	Professional & personal development training for Trauma Informed Care	
Lack of collaboration with MIS to learn tasks	Necessary software/technical support is available to the CHS department	
Limited technology resources/platforms for virtual visits	Number of website updates in one month	
Covid restricting sending staff for further development	Regular team building activities	

Lack of training in trauma informed care and health equity		
eLearnings are most common way of training right now; too many		
Lack of time to learn new things		
Best Dept in OCHD!		
TEAM: JoAnn, Deb, Char, Phyl, Carly, Leah, Kelly	, Betsey, Tammy, Brittany, Kris, Sam, Tek	, Stacy, Neva, Heidi, Becky, Michelle, Stef
EXPAND AND ENHANCE OUR SERVICES	(SD3)	
Resources are unknown to all members	Surveys/questionnaires/polls being completed	Incorporate health equity and trauma informed care principles into our existing
LTC services- needs are being met	Increase in client/patient count and satisfaction	and expanding programs and services.
Transportation needs are not being met	Completion certificates of Trauma- Informed care trainings	
Unclear/changing community needs	New resources offered	_
Budget is limiting expansion	Customer Satisfaction	_
Lack of community input	Home Health services offered to the community	
Needs assessment already done by dept	Lower deaths/disease rates	_
Trauma Informed care training is needed	Increased referrals	_
Consultant company PRN hired/work done to assist in starting Home Health Agency		-
Limited staff		
Limited platforms for remote services; needing more outreach virtually		
Working to secure a safe environment for the community from Covid 19		
TEAM: Hanna, Candi, Louetta, Beatrice, Tamar,	Carol, Toni, Andrea, Brenda, Susan	

Strategic Direction:					Accomplishment Tit	tle (w	hat)
				CHS will increase Facebook engagements by 20%,			
SD1: Strengthen Strategic Communication & Collaboration				update staff services	s guid	e, and increase	
					collaboration with o	ther (	Dneida Divisions.
Intent (why)					Start Date: April	15, 20	)21
Market CHS to improve colla	aboration w/in and outside of our o	division			End Date: June 30	0, 202	1
Implementation Steps (how	/)		Who	)	When		Where
1. Find baseline for Facebo	ook engagements for OCHD page		Carrie		Thursday 4/22		Email
2. Create/help coordinate	posts to increase presence (send to	0	ALL				
Carrie/Mollie).							
a. WIC/Nutrition posts			Alyssa		Thurs 4/29		
b. Long Term Care posts			Mallory/Richel	1	Thurs 5/13		
<ul> <li>c. HPDP posts</li> </ul>			Dawn/Belinda		Thurs 5/27		
d. Population Based posts			Mollie		Thurs 6/10		
e. CHN Case Managemen			Maria/Tricia/B	arb	Thurs 6/24		
Build into post words- e	ngagement.						
Coordinator	Collaborators or Partners	Evaluation Me		Budget			t Meeting Date
Maria/Tricia	Carrie, Deb, Alyssa	Engagement n	umbers	N/A		May	/ 6 <sup>th</sup> @ 8:30am
Team Members							
Mollie	Social Media Committee				nmitment		
Barb	CHS staff			5 hours			
Dawn							
Mallory							
Richell							
Belinda							
Betty							

Strategic Direction:			Accomplishment Title	(what)
Empower Our Workforce (SD2)		Increase staff satisfaction by 10% utilizing		
			staff driven activities, t	rainings, and
			technology solutions.	
Intent (why)				Start Date:
Increased moral, optimize abilities, incr	ease cohesiveness, inclusion, jo	b empathy, understandi	ng of each other's roles	04/15/2021
				End Date:
				06/30/2021
Implementation Steps (how)		Who	When	Where
1. Develop pre and post survey (survey monkey or MS Forms.)		Kris, Tammy, Britt, Victoria	By 04/30/2021	OCHC- main
2. Review and finalized pre/ post	survey questions.	SD Team	By 05/07/2021	Teams/ email
3. Distribute survey.		Leah	By 05/14/2021	Electronic
4. Survey analysis.		SD Team	By 05/21/2021	Team/ email
5. Determine next steps.		SD Team	By 05/28/2021	Team/ email
Coordinator	Collaborators or Partners	Evaluation Measures	Budget	Next Meeting Date
Debbie Miller	Michelle, Stefanie, Victoria	Baseline	\$0	TBD
	Flowers			
Team Members			Time Commitment	
JoAnn, Char, Phyl, Carly, Leah, Kelly,			4 hours	
Betsey, Tammy, Brittany, Kris, Sam,				
Tek, Stacy, Neva, Heidi, Becky				

Strategic Direction:		Accomplishment Title (what)				
Expand our Responsive Care (SD3)			By March 2022, CHS will incorporate health equity and trauma- informed care principles into our existing and expanding programs			
Intent (why)					Star	t Date: 4/15/21
To improve the quality of o	our services to include trauma-	-informed care	e practices.		End	Date: 7/15/21
Implementation Steps (how)			Who		When	Where
1. Create a survey to ask CHS department staff about knowledge of			Team		Thursday, 4/22	Teams, email
trauma-informed care	principles or resources availab	ole.				
2. Distribute the survey t	o all CHS staff.		TBD			
<ol><li>Evaluate the survey results to determine next steps.</li></ol>		TBD				
Coordinator	Collaborators or Partners	Evaluation	Apasuras	Budget		Next Meeting Date
ee or annu tor	Collaborators or Partners	Evaluation N	Neasures	Budget		Next Meeting Date
Hanna Leisgang		Evaluation N	leasures		mmitment	Next Meeting Date
Hanna Leisgang Team Members	Collaborators or Partners Advisors: Susan Higgs and Brenda Haen	Evaluation N	Neasures		ommitment	Next Meeting Date
Hanna Leisgang Team Members Candi Cornelius, Louetta	Advisors: Susan Higgs and	Evaluation N	Neasures		ommitment	Next Meeting Date
Hanna Leisgang Team Members Candi Cornelius, Louetta Fowler, Beatrice	Advisors: Susan Higgs and	Evaluation N	Neasures		ommitment	Next Meeting Date
Hanna Leisgang Team Members Candi Cornelius, Louetta Fowler, Beatrice Skenandore, Tamar	Advisors: Susan Higgs and	Evaluation N	Neasures		mmitment	Next Meeting Date
Coordinator Hanna Leisgang Team Members Candi Cornelius, Louetta Fowler, Beatrice Skenandore, Tamar Ramirez, Carol Torres, Toni Walkingeagle,	Advisors: Susan Higgs and	Evaluation N	Neasures		ommitment	Next Meeting Date