

*FY2015*

2013-2018

# STRATEGIC PLAN

## Annual Progress Report

*(March 2015 – February 2016)*



Harris County

**Public Health**

Building a Healthy Community

# 2013-2018 HCPH Strategic Plan

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*FY2015 (March 2015 – February 2016)*

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### Version

The following table is contained herein for the purposes of version control.

Revision	Date	What Changed	Who
1.0	Feb 15,2016	Initial Draft	J. Clarke
1.1	Feb 22,2016	Revisions (Graphs, edits, participants)	J. Clarke; J. Hadayia; K. Landis
1.2	March 7,2016	Revisions, additional info, edits	J. Clarke; K Landis; G. Wadhwa
1.3	March 9,2016	Revisions, edits	J. Clarke; J. Hadayia; A. Rajagopal
1.4	March 23,2016	Final version	L. Becker; J.Clarke

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### Introduction

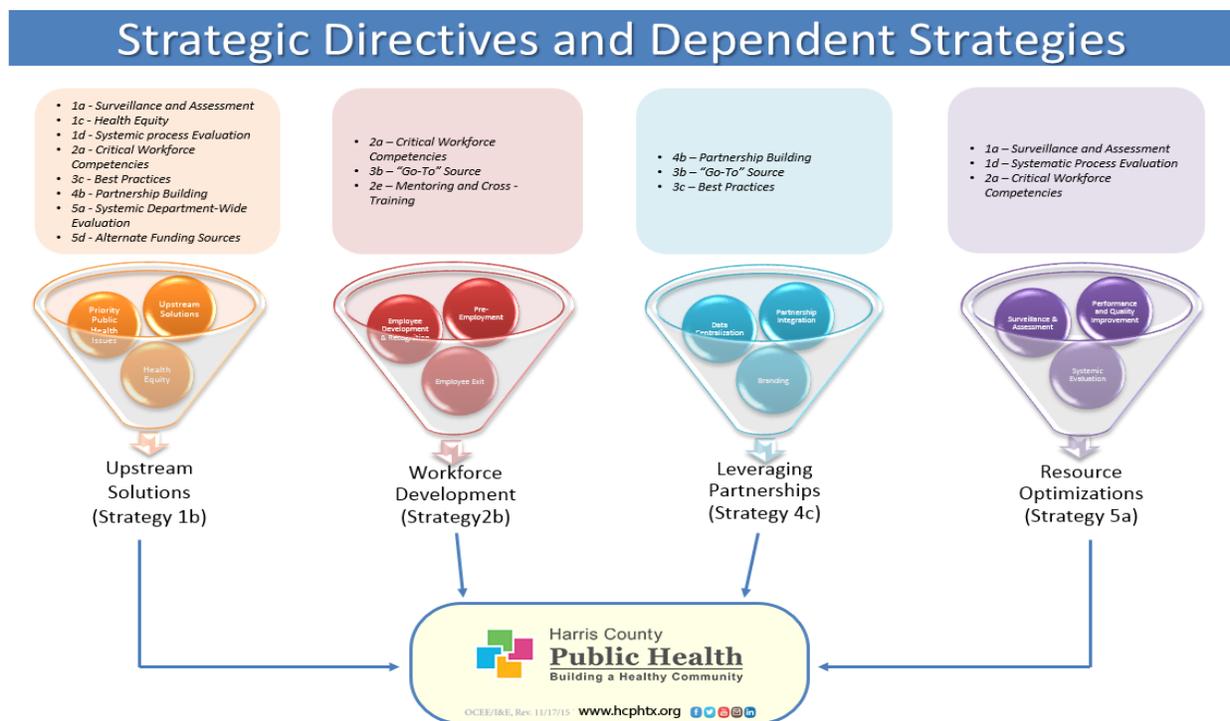
#### Purpose

The 2013-2018 HCPH Strategic Plan (Strategic Plan) outlines priority issues for advancing both organizational effectiveness of Harris County Public Health (HCPH) and population health in the Harris County jurisdiction. The Strategic Plan serves as a foundation for the planning, and implementation of activities in HCPH that ensure a healthier Harris County, and it sets forth direction for improving overall organizational structures, program design, and resource allocation. The purpose of this Annual Progress Report is to summarize the status of Strategic Plan implementation per year by describing key accomplishments for each identified priority as well as next steps.

#### Prioritization of Strategies

In January 2013, the HCPH Executive Leadership Team conducted a prioritization process at a Strategic Planning retreat that resulted in the selection of four strategies from the Strategic Plan for implementation. Although only four have been prioritized for current implementation, all strategies from the Strategic Plan are interrelated. Therefore, each of the prioritized Strategic Directives from the first year of implementation continued into year two.

See graphic below for detail:



**Strategy 3:** Improve recognition, understanding and support of the HCPH organization, our activities and the broad mission of public health among our stakeholders.

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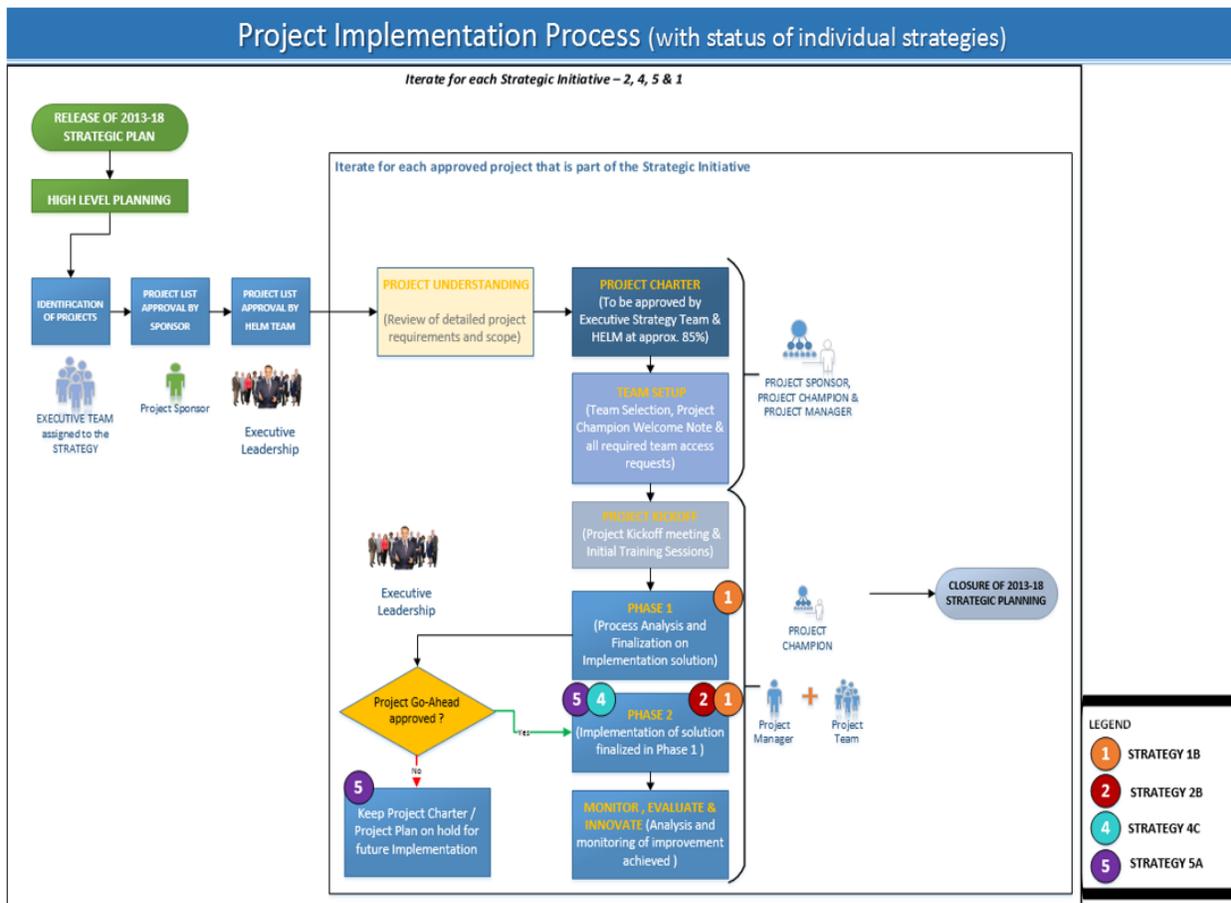
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### Process

To implement each prioritized Strategic Directive, specific projects were identified by the HCPH Executive Leadership Team in 2013. These projects were chartered and kicked off in 2014 (Phase 1). In the first quarter of 2015, the projects were presented to the HCPH Executive Leadership Team, which subsequently approved, disapproved, or “held” Phase 1 recommendations. Approved projects moved into Phase 2 for implementation, and new Project Teams were formed and chartered using a Monitor, Evaluate, and Innovate cycle. Some of the original focus areas were also re-categorized for consistency and alignment.

See graphic below for detail:



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### Staff Engagement

In total, 124 HCPH employees participated in Strategic Plan project teams and implementation efforts in year two. 85 employees were engaged on more than one project team.

In addition to project team participation, all HCPH employees were kept informed about Strategic Plan updates, status, and implementation through:

- Quarterly all staff “Public Health Matters” meeting updates;
- Key informant interviews conducted with staff serving as subject matter experts for various project teams; and
- Staff surveys as part of the information-gathering stage for some project teams.

The graphic below depicts the structure, leadership, and status of each project team:



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### Strategy 1B – Upstream Solutions

*Goal: Enhance capacity to assess and proactively respond to current and emerging public health issues in a manner that optimizes population health and achieves health equity.*

BACKGROUND: It is of importance to HCPH to have departmental efforts that align with the mission of public health as well as serve the ever-evolving health needs of the population in Harris County. Reflecting national trends, the leading causes of death have shifted from infectious diseases to chronic diseases. It has also become evident that in addition to individual behaviors, healthy choices are shaped by the choices one has access to. Consequently, it is imperative that HCPH uses situational awareness to effectively respond to current and emerging health issues as well as ensure equal opportunities to all Harris County residents through the use of health equity principles.

The following table is a snapshot of current project status.

Strategy 1 Projects	Phase 1	Phase 2	Other
Health Equity			
Priority Public Health Issues			
Upstream Solutions			

The following three projects were established to address Strategic Directive 1B:

1. **Health Equity** – Work towards the goal of eliminating health inequities by assessing the extent to which inequities exist among Harris County populations and preventing additional inequities that could occur as an unintended consequence of work by HCPH or community partners.
  - The Phase 1 Health Equity Project Team Chartered in March 2015 developed a department-wide Health Equity Policy, Glossary of Terms, and Health Equity Framework in accordance with best practices and Public Health Accreditation measures. All were presented and approved for implementation by HCPH Executive Leadership in July 2015.

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- The Phase 2 Health Equity Project Team was chartered in August 2015 to develop procedures for the implementation of the new department-wide Health Equity Policy. The procedures outline a step-by-step process for ensuring health equity is integrated into: new and current program development, communications, and community engagement, partnerships, and data management. The procedures also include a Checklist for Division and Office-level application and an extensive appendix of vetted tools and resources. All have been finalized by the Project Team and are pending review and approval from the Executive Leadership Team.
2. **Upstream Solutions** - Emphasize population-based approaches with “upstream solutions” that shape policy, educate, and build capacity among targeted groups and various sectors to bring about system-wide improvements in health.
- The HCPH Executive Leadership Team placed Upstream Solutions into “Cancelled” status as implementation of the supporting dependent strategies across all Strategic Directives would inherently drive HCPH into a greater Upstream Solutions role, which was the intended goal of this project.
3. **Priority Public Health Issues** – Enhance HCPH capacity to conduct local surveillance and assessment activities in order to monitor health and environmental conditions with an emphasis on the priority public health issues.
- The Phase 1 Project Team was chartered in June 2015 to utilize an inventory of population based services and programs in HCPH to prioritize public health issues needing further data collection. A Surveillance and Assessment Questionnaire and Checklist were developed to identify gaps within respective programs. The “as-is” analysis of the selected programs is prepared, and staff are now scheduling program interviews.

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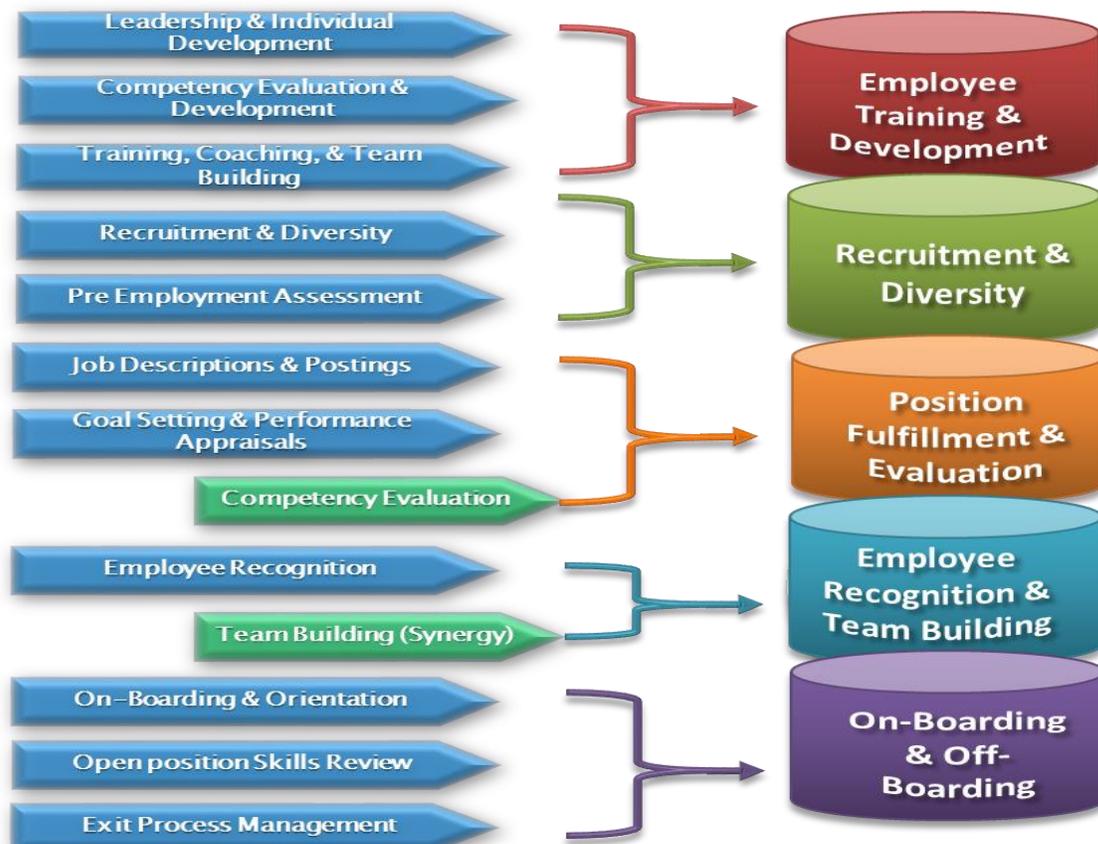
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### Strategy 2B – Workforce Development

**Goal:** *Establish a structure that fosters leadership development for current and future leaders; ongoing professional development opportunities that align with strategic priorities; and opportunities to apply newly acquired skills and knowledge.*

BACKGROUND: The economic recession in 2008 caused unprecedented budget cuts and workforce reductions in the public health sector both nationally and locally. As a result, HCPH lost 30% of its workforce and substantial budget decreases came from national, state, and local levels. HCPH must now make efforts to strengthen its current workforce by investing in its people as well as in the work environment in order to increase productivity and retention. HCPH must also align and develop worker skill sets with strategic priorities in order to effectively improve population health.

In implementing this Strategic Directive, most of the original Phase 1 Project Teams were reorganized for Phase 2. **The following graphic shows how the re-organization took place (with newly-added focus areas on the left in green):**



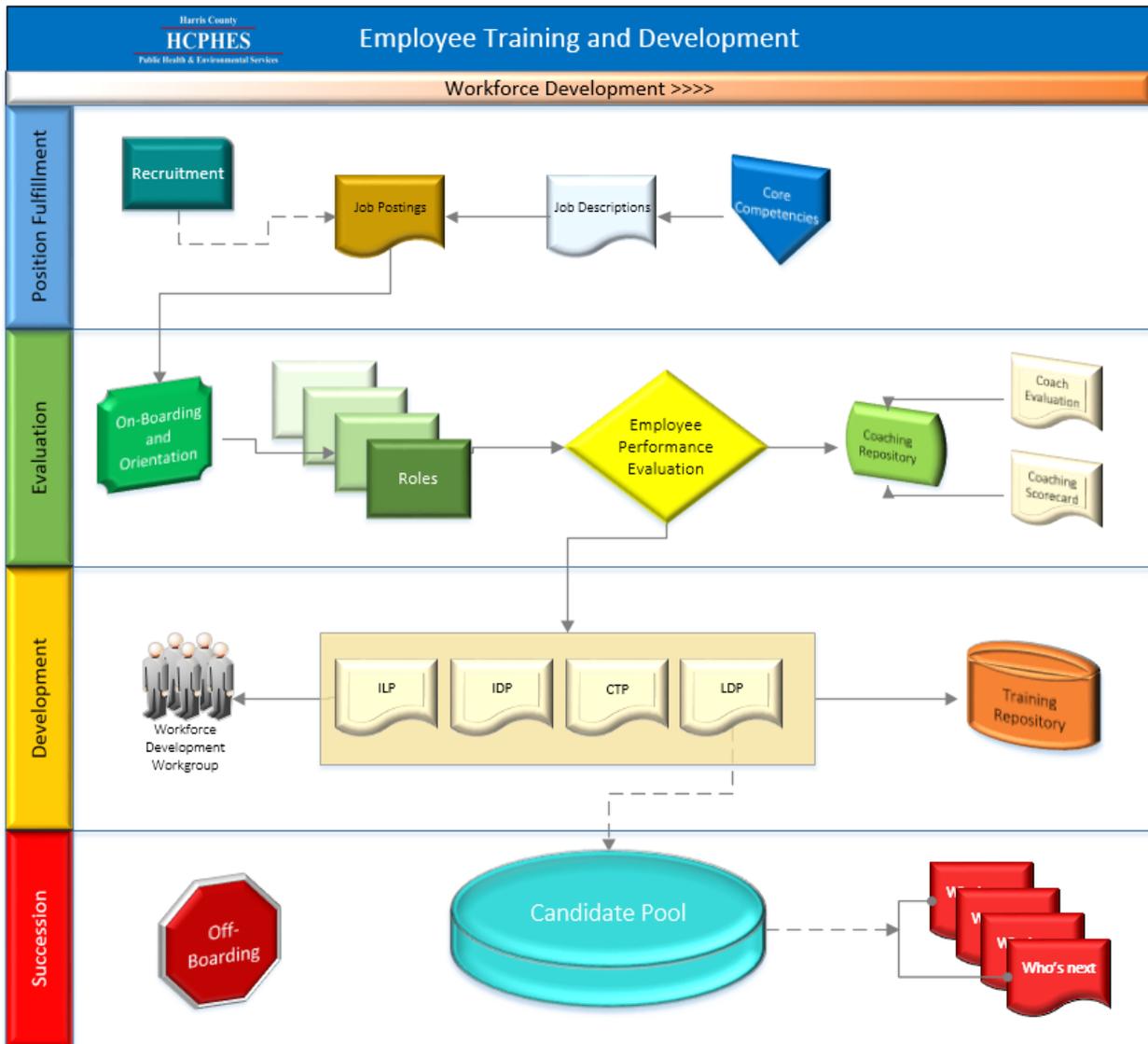
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Though reorganized, all of the Phase 2 Project Teams relate to developing the workforce – from pre-hire to post employment and many areas in between. As such, the processes, documents, decisions, and directions in the new Phase 2 Project Teams had to maintain consistency between projects and between phases. Constant communication and collaboration was necessary to ensure alignment and eliminate duplication. Affirming these assurances comprised a large part of implementation for this Strategic Directive.

The graphic below shows how each initiative links together:



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The following table is a snapshot of current project status.

Strategy 2 Projects	Phase 1	Phase 2	Other
Recruitment & Diversity			
On-Boarding and Off-Boarding			
Position Fulfillment and Evaluation			
Employee Training and Development			Workforce Development Workgroup Chartered for ongoing program support and implementation
Employee Recognition and Team Building			CARE Workgroup Chartered for ongoing program support and implementation

The following five projects were established to address Strategic Directive 2B:

1. **On-Boarding and Off-Boarding** – End to end processes to enhance all aspects of employee development by focusing on On-Boarding and Off-Boarding as defined in Phase 1 focus areas:
  - i. *On-Boarding and Orientation*
  - ii. *Open Position Skills Review*
  - iii. *Off-Boarding (Exit Process Management)*
2. Completed the Phase 1 Project Team, which analyzed the current Exit Management Process as well as Succession Planning. Prioritized recommendations were then approved by the HCPH Executive Leadership Team for implementation.
3. The Phase 2 Project Team was chartered in March 2015 and began their work by creating a new Onboarding Tool in our CRM system. The Team also determined that New Employee Orientation should be scaled-up to two days (vs. one). The Team also identified the need to transition Off-Boarding from a manual process to the CRM workflow as well. Work on these activities is ongoing.
2. **Position Fulfillment and Evaluation** – End to end processes to enhance Job Descriptions and Job Postings as well as to streamline the Goal Setting and Performance Appraisal system to improve Employee Evaluations as defined in Phase 1 focus areas:
  - i. *Job Descriptions and Job Postings*
  - ii. *Goal Setting and Performance Appraisals*
  - iii. *Competency Evaluation*

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- Completed the Phase 1 Project Team, which analyzed current processes, activities, and gaps related to Employee Development, including: Training Plans, Job Descriptions, Goal Setting and Performance Evaluation, Competency Development, Cross-Training, Skills Training, Team Building, and Coaching. Prioritized recommendations were approved by the HCPH Executive Leadership Team for implementation. It was also determined that HCPH Human Resources (HR) should lead these new activities.
  - The Phase 2 Project Team was chartered March 2015, and a Scope of Work was created to acquire a technology solution to aide in these initiatives. Vendor selection was still underway at the end of FY2015.
3. **Employee Training and Development** – End to end processes to address Employee Development and Trainings as defined in Phase 1 focus areas:
- i. Leadership & Individual Development*
  - ii. Training, Coaching, & Team Building*
  - iii. Competency Evaluation & Development*
  - iv.* The Phase 1 Project Team was completed and made recommendations for the content of our Workforce Development Plan (WDP) (to be approved in FY2016 in accordance with Public Health Accreditation requirements). Prioritized recommendations were approved by the HCPH Executive Leadership Team for implementation.
- The Phase 2 Project Team was chartered in March 2015 to implement Phase 1 recommendations for the following elements:
    - a. Training Plan*
    - b. Competency Evaluation*
    - c. Skills Training*
    - d. Cross Training*
    - e. Coaching*
    - f. Leadership Development Plan (LDP)*
    - g. Individual Development Plan (IDP)*
    - h. Individual Learning Plan (ILP)*
    - i. Succession Planning*
  - The Project Team composed a repository of trainings provided at HCPH offered by Divisions and Offices and Harris County. The Team reviewed the entirety of current job descriptions, consolidated a list of common skillsets, and created a competency model. The Team also created a succession planning template to capture and calculate risk. The “as-is” analysis of succession planning also included interviewing all supervisors.
  - The Project Team next created templates for the Individual Learning Plans (ILP), Individual Development Plans (IDP), Leadership Development Plans (LDP), Cross-

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Training Plans (CTP), Coaching Evaluation Scorecards, and Coach Evaluation Template.

- The Phase 2 Project Team presented its recommendation for the formation of an ongoing workforce development committee to HCPH Executive Leadership. This committee will oversee the continual implementation and use of the materials, programs, and initiatives above. The Workgroup was approved in November 2015 and chartered in February 2016. Members include HCPH employees in each Division or Office with a training or development role.
4. **Recruitment and Diversity** – End to end processes to streamline the Recruitment Process while involving a greater number of active recruiting methods and building diversity amongst new talent as defined in Phase 1 focus areas:
- i. Recruitment and Diversity*
  - ii. Pre-Employment Assessment*
- Completed the Phase 1 Project Team, which analyzed current processes, activities, and gaps related to Pre-Employment, including: Open Position Skills Review, Job Posting, Recruitment, Pre-Employment Testing and Assessment, Onboarding, and Orientation. Prioritized recommendations were approved by the HCPH Executive Leadership Team for implementation.
  - The Phase 2 Project Team was chartered in March 2015. After that time, the HCPH HR department took ownership of recruitment and diversity activities. Pre-Employment Assessment is also now embedded in the process of recruitment. As a result, this Project Team did not move forward in FY2015.
5. **Employee Recognition and Team Building** – All activities that would enhance employee, team, and departmental recognition across HCPH.
- Completed the Phase 1 Project Team, which compiled and prioritized Recognition Program recommendations for potential implementation.
  - The Phase 2 Project Team was chartered March 2015 with the goal of establishing or revamping existing recognition programs including such possible strategies as:
    - a. Award luncheon / banquet (annual in-service)*
    - b. Caught in the act*
    - c. Employee of the quarter (modifications to existing program)*
    - d. Volunteer day*

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- |  |  |
|--|--|
| <i>e. Professional licensing/<br/>membership reimbursements</i>      | <i>j. Community program recognition</i>                              |
| <i>f. Hand written thank you cards</i>                               | <i>k. Annual division/office meeting</i>                             |
| <i>g. Annual outreach partner<br/>recognition</i>                    | <i>l. Tuition reimbursement (educational)</i>                        |
| <i>h. Employee welcome into HCPH</i>                                 | <i>m. Work anniversary recognition</i>                               |
| <i>i. Employee feel-good initiatives<br/>(workplace development)</i> | <i>n. Recognition day event/open house/<br/>compressed core tour</i> |
|  | <i>o. Community recognition album</i>                                |
|  | <i>p. Acknowledgement for national days</i>                          |
|  | <i>q. Recognition for additional trainings/<br/>certifications</i>   |
|  | <i>r. HCPH logo contest</i>  |
|  | <i>s. The HCPH store</i>   |

- The Phase 2 Project Team presented its recommendations for an ongoing employee recognition workgroup to HCPH Executive Leadership. This workgroup will oversee and further support employee recognition activities in HCPH. The Workgroup was approved in November 2015 and chartered in January 2016. It was renamed the “HCPH C.A.R.E Workgroup” (Collaborative Activities, Recognitions, and Events) at “Public Health Matters” in February 2015.

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### Strategy 4C – Leveraging Partnerships

*Goal: Actively pursue opportunities to leverage and share resources among partners, avoid duplicative effort and facilitate sustainable public health practice through internal and external capacity-building efforts across community organizations.*

BACKGROUND: The primary objective of Strategy 4C is to improve partnership engagement efforts – both internally and externally. Harris County public health officials and businesses actively work together to take advantage of the expertise and resources that can be collectively used to improve population health – workforce, families and community. Leveraging partnership opportunities and maximizing resources within other business sectors will allow for the advancement of the public health mission in Harris County, while also allowing for more sustainable public health improvement overall.

The following table is a snapshot of current project status.

Strategy 4 Projects	Phase 1	Phase 2	Other
Branding Campaign			
Stakeholder / Partnership Data Centralization			
Partnership Integration			
Best Practice Resources			

The following four projects were established to address Strategic Directive 4C:

- Repository of Branding/Marketing Resources** – Create a repository of branding materials, which allows the opportunity to broaden staff awareness of HCPH activities and Public Health overall.
  - In FY2014, the Phase 1 Project Team compiled samples of HCPH branding/marketing resources by Division and Office and conducted a Situational Analysis and Needs Assessment of how to create marketing materials. Activities also included a review of Public Health Accreditation requirements related to branding.
  - A Phase 2 was not chartered as an official “project team” as the subject matter expertise in this area resides almost solely within the Office of Communications

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Education and Engagement (OCEE). The project was also “on-hold” throughout most of FY2015 while HCPH searched for a new OCEE director. Once the role was filled, the re-branding project kicked off with resources and team members from OCEE. Their focus thus far has been on developing a new HCPH logo, which will form the basis of a branding strategy.

2. **Stakeholder/Partnership Data Centralization** – Consolidate stakeholder and partnership information used across HCPH.
  - The Phase 1 Project Team was completed in FY2014, which identified the need for a centralized tool for storing stakeholder and partnership contact information across Divisions and Offices.
  - A Phase 2 was not given the “green light” by Executive Leadership to proceed to implementation due to the prioritization of other areas of the Strategic Plan.
3. **Partnership Integration** – Strengthen HCPH partnerships and networks through integration of enhanced partnership engagement activities across the health department.
  - The Phase 1 Project Team was completed in FY2014, which developed “Rules of Engagement” for partnerships.
  - A Phase 2 was not given the “green light” by Executive Leadership to proceed to implementation due to the prioritization of other areas of the Strategic Plan.
4. **Best Practices Resources** – Improve the positioning of HCPH and its respective Divisions/Offices; promote HCPH as the “Go-To” source for staff and external stakeholders.
  - The Phase 1 Project Team completed recommendations in FY2014 including creation of best practices repository and toolkit series as well as staff training on best practices and a structure for collaborative learning.
  - A Phase 2 was not given the “green light” by Executive Leadership to proceed to implementation due to the prioritization of other areas of the Strategic Plan.

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### Strategy 5A – Resource Optimization

*Goal: Invest in systems that support ongoing, department-wide evaluation and quality improvement (QI) initiatives to identify opportunities to maximize existing resources and acquire needed resources.*

BACKGROUND: The 5a strategic directive places emphasis on the maximization of existing resources and making use of emerging tools and technologies. HCPH conducted an initial assessment and evaluation of the organization to identify and prioritize resource gaps. The organization will address disparities by reallocation of existing resources or acquisition of new resources. It is necessary for HCPH to balance the need to maximize the potential uses of current technology with the ongoing need for efficiency and effectiveness that emerging technologies provide.

The following table is a snapshot of current project status.

Strategy 5 Projects	Phase 1	Phase 2	Other
Investment in Systems			PQJ Council (Committee) Chartered for ongoing program support and implementation
Local Surveillance and Assessment			
Systemic Evaluation			
Critical Workforce Competencies			

The following four projects were established to address Strategic Directive 5A:

1. **Investment in Systems** – Invest in systems that support ongoing, department-wide evaluation and quality improvement initiatives to identify opportunities to maximize existing resources and acquire new ones.
  - The Phase 1 Project Team assessed IT Governance best practices to identify actions to strengthen the HCPH IT structure. The team also evaluated the HCPH IT Technology Capability Framework (specifically: Service Management, Project Management, and Resource Management) and pulled from best practices to develop a proposal for improving our current capability framework. The Phase 1 Project Team also conducted an extensive evaluation of existing quality

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improvement methodologies and selected Lean Six Sigma as the recommended department-wide solution for HCPH.

- The Phase 2 Performance Management and Quality Improvement (PQI) Project Team was chartered in September 2015 to develop and implement as department-wide PQI program in accordance with Public Health Accreditation requirements. The Phase 2 Project Team designed standards and measures for an HCPH-wide performance dashboard aligned with the Strategic Directives and developed a QI system, including recommendations to operationalize.
- The PQI Plan and recommendations were reviewed and approved by HCPH Executive Leadership in February 2016. Going forward, the Project Team will transition into a “PQI Council” for HCPH. This group will support and maintain the ongoing implementation of the PQI Plan, provide tools and training in PQI to other staff, and assist in the identification of quality improvement areas and official QI Projects ongoing.
- This project also included a partnership with San Jacinto College to provide 20 HCPH staff (including PQI Project Team members) Lean Six Sigma Green Belt training and certification. Graduates will then function as mentors and trainers for Lean Six application department-wide.

2. **Local Surveillance & Assessment** - Enhance the capacity within HCPH to monitor health and environmental conditions.

- The Phase 1 Project Team was completed in FY2014, which inventoried department-wide methods for data collection, storage, and analysis to serve as the foundation for creating effective dashboards to augment local surveillance and assessment activities.
- A Phase 2 was not given the “green light” by Executive Leadership to proceed to implementation due to the prioritization of other areas of the Strategic Plan.

3. **Systematic Evaluation** – Systematic evaluation of processes and impact of population based approaches that HCPH employs.

- The Phase 1 Project Team was completed in FY2014, which conducted a department-wide high-level process evaluation and identified opportunities to improve effectiveness and efficiency.

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- A Phase 2 was not given the “green light” by Executive Leadership to proceed to implementation due to the prioritization of other areas of the Strategic Plan.
4. **Critical Workforce Competencies** – Focus on the technological aspects of critical workforce competency building.
- The Phase 1 Project Team was completed in FY2014, which included a department-wide assessment of HCPH workforce competencies in the areas of technology, data analytics, and quality improvement as well as identified opportunities for improvement at the organizational and departmental levels.
  - A Phase 2 was not given the “green light” by Executive Leadership to proceed to implementation due to the prioritization of other areas of the Strategic Plan. Also, the development of agency competencies is incorporated within Strategy 2B – Employee Training and Development (described above).

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### Summary

#### *Projects*

In the beginning of FY2015 of HCPH Strategic Plan Implementation, seven of the 16 identified projects had been approved by the HCPH Executive Leadership Team and chartered for implementation. Of the remaining, eight projects were placed on hold, and one was cancelled. Below is a summary of implementation stages for FY2015:

March 2015, HCPH Executive Leadership approved seven projects for implementation:

- **Strategy 1B:** Health Equity, Priority Public Health Issues
- **Strategy 2B:** Employee Recognition & Team Building, Employee Training & Development, On-boarding & Off-boarding, Recruitment & Diversity, Position Fulfillment & Evaluation

July 2015, the **Strategy 1B** Health Equity Phase 1 Team Presented recommendations to Executive Leadership and was approved to move forward for Phase 2 implementation. The Phase 2 Project Team was assembled and chartered in September 2015.

August 2015, Executive Leadership approved the **Strategy 5A** Investment in Systems/ Quality Improvement Project Team. The Phase 2 Project Team was assembled and chartered in September 2015.

October 2015, Executive Leadership filled the vacant Office of Communication Education & Engagement (OCEE) Director role and upon appointment engaged internal resources within OCEE to accomplish recommendations set forth in the **Strategy 4C** Branding Phase 1. Due to the specific skillsets required for this, there was no official Phase 2 Project Team chartered although work is proceeding.

November 2015, the **Strategy 2B** Employee Recognition & Team Building and Employee Training & Development projects both completed their Phase 2 process and transitioned into ongoing support workgroups or committees.

February 2016, the **Strategy 5A** Investment in Systems (PQI) Project Team presented deliverables and recommendations to and then Executive Leadership approved the formation and transition of project team members into an ongoing support workgroup, the HCPH PQI Council.

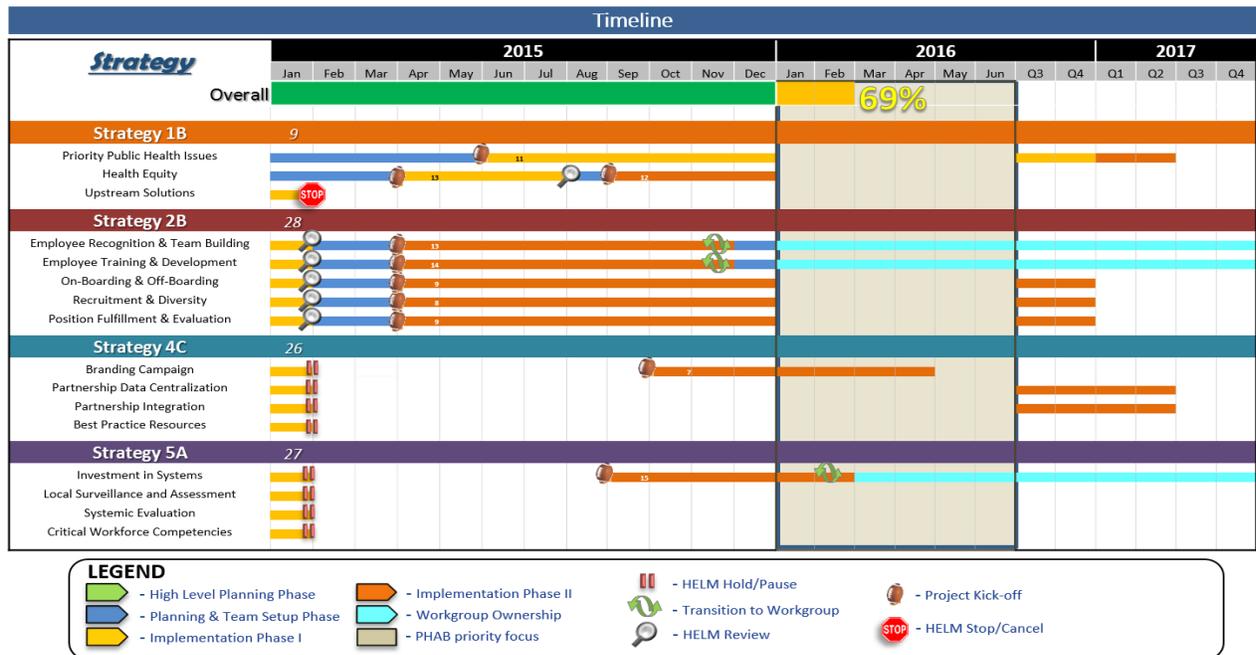
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By the end of FY2015, 69% of project activities are complete. Six projects remain “on hold” or in “pending” status, awaiting other higher prioritized activities to conclude before they will be released (targeting fourth quarter of FY2016).

The following graphic depicts overall project status and outcomes to date.



### Personnel

From the 90 HCPH employees engaged in FY2014 project teams, 36 transitioned into Phase 2 Project Teams and were joined by an additional 86 employees. A total of over 174 HCPH employees have been engaged in Strategic Plan implementation throughout FY2014 and FY2015.

Going forward, the first and second quarters of FY2016 have seen HCPH scaling-up resources for Public Health Accreditation. An Accreditation Project Team with 29 staff was chartered and convened in January 2016. In light of this, several Strategic Planning projects (not specific to accreditation) have been given lower priority and/or placed in an “on-hold” or “suspended” status to allow for staff to focus on accreditation. Once the HCPH Accreditation process is complete (aim: third quarter of 2016), full Strategic Plan implementation will resume.

FY2016 implementation of the Plan will also focus on moving any remaining chartered teams still in Phase 1 into Phase 2. We will also charter remaining projects for the four Strategic Directives, continue to engage all HCPH staff in the implementation process, and continue to monitor other department-wide quality improvement initiatives.

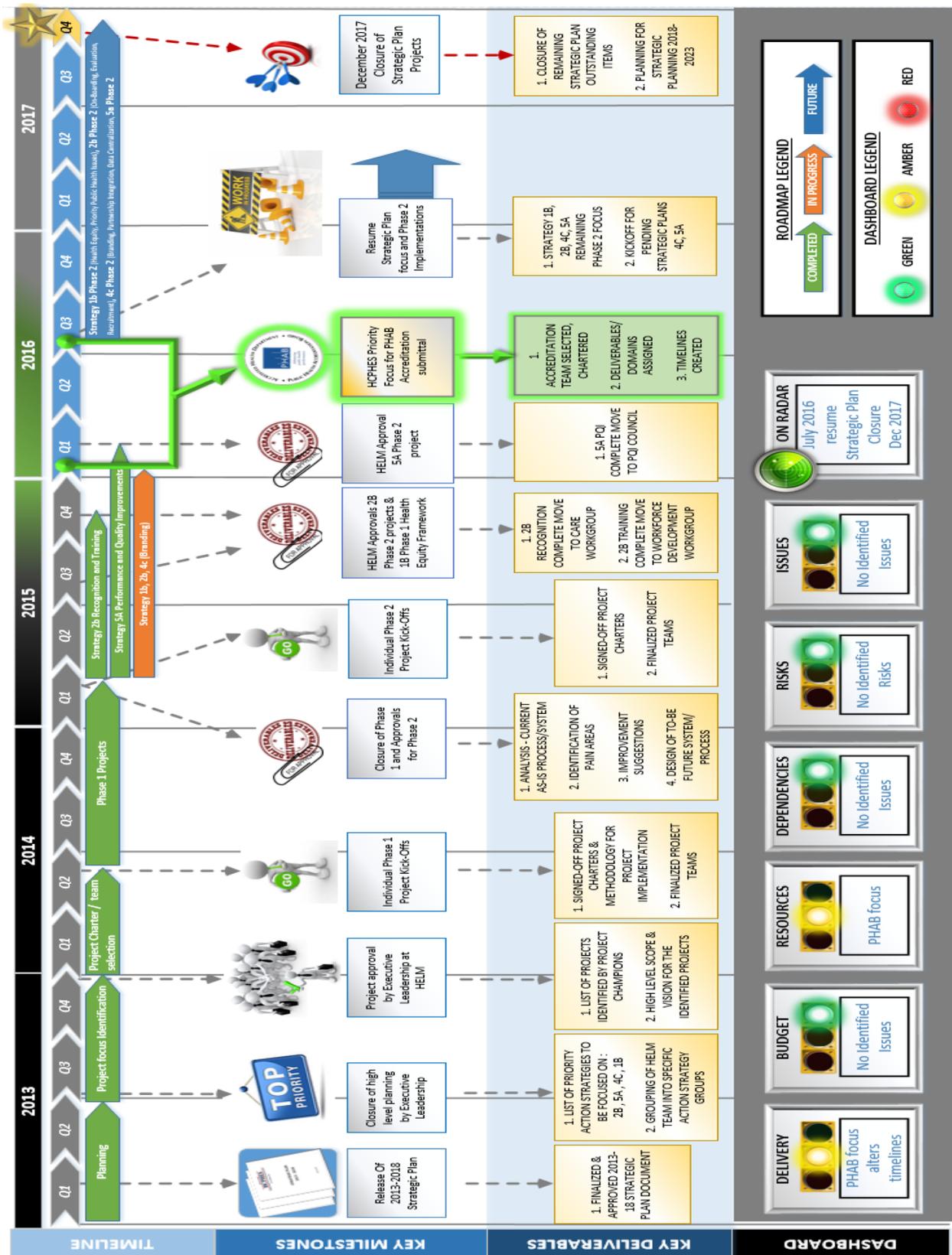
[This is illustrated on the Strategic Plan Roadmap and Dashboard pg. 20](#)

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### Strategic Plan Roadmap and Dashboard:



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### Participants in Strategic Plan FY2015 Project Teams

#### Project Sponsor: Les Becker

#### Project Team 1B:

**Project Champions:** Dr. Umair Shah, Les Becker, Mac McClendon

**Project Managers:** John Clarke \*(P), Shannon Gabrysch \*

#### Team Members:

- Shawnveal August
- Brenda Cabaniss\*
- Raul Camarillo
- Giovanna Castro
- Katie Chennisi\*(P)
- Marilyn Christian
- Deanna Copeland\*(P)
- Patricia Cummings
- Linda Forys
- Jennifer Hadayia\*(P)
- Joanna Hawkins\*
- Kelly Johnson\*
- Kila Johnson
- Sarah Milligan
- Ashley Minkeu\*(P)
- Abbhiraami Rajagopal\*(P)
- Kelly Reed-Hirsch\*(P)
- Martin Reyna\*(P)
- Jenny Varghese\*(P)

#### Project Team 2B:

**Project Champions:** Les Becker, Michael Schaffer, Gwen Sims, Brian Arenare, Ed Anderson

**Project Managers:** Gopi Wadhwa \*, John Clarke \*(P), Shweta Kullachanda \*

#### Team Members:

- Ed Anderson\*(P)
- Carolyn Bates
- Henry Bradford\*
- Jeanett Castillo\*
- Marilyn Christian\*
- Amelia Day\*
- Mary Durette
- Veronica Garza
- Laura Hildebrand
- Deb Johnson\*(P)
- Sandy Kachur\*
- Jennifer Kiger (P)
- Gail LeBlanc
- Alyssa Linck
- Danielle Macicek\*
- Martha Marquez\*(P)
- Ana Milan\*
- Jerry Miller
- Ashley Minkeu\*(P)
- Jolene Norbert-Harrell

- Paula Ortiz
- Angel Palacios\*
- Rebecca Riley\*(P)
- Renee Robinson
- Jeraine Root
- Brennon Sansom
- Josalyn Scott
- Alberta Shaw

#### Project Team 4C:

**Project Champions:** Elizabeth Perez Rocaille Roberts, Dr. Michael White

#### Project Managers:

#### Team Members:

No teams officially chartered for the strategy 4c projects however the OCEE division (staff below) has proceeded into implementation of branding.

- Henry Bradford\*
- Brenda Cabaniss\*
- Varoy Davis
- Hallie Frazee
- Sandy Kachur\*
- Martha Marquez\*(P)
- Jenny Varghese\*(P)
- Andres Velasco

#### Project Team 5A:

**Project Champions:** Les Becker, Mac McClendon, Rocaille Roberts, Michael Schaffer

**Project Managers:** Shannon Gabrysch \*, John Clarke \*(P)

#### Team Members:

- Deanna Copeland\*(P)
- Harold Dutton
- Chris Fredregill
- Jennifer Hadayia\*(P)
- Joanna Hawkins\*
- Will Hudson\*(P)
- Kelly Johnson\*
- Tanweer Kaleemullah
- Danielle Macicek\*
- Angel Palacios\*
- Hoda Sana
- Tasha Traylor\*(P)
- Nikki Valencia

#### Project Management Team

- Claire Cutts\*
- John Clarke\*(P)
- Lawrence Coffee\*(P)
- Shannon Gabrysch\*
- Janae Herbert
- Shweta Kullachanda\*
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*\* Denotes staff members who participated on multiple project teams*

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