Dear Colleagues,

Pima County is not as healthy as we can be. We hear it in the media every day. For the past two years, we have been hearing from our community, through the Healthy Pima initiative, about both the important challenges we face and the home grown resources we can draw upon. Our stakeholders told us there are four key areas that we need to work on.

- Facilitating access to health care services
- Supporting individuals, families, and communities to engage in healthy lifestyles
- Empowering folks with information and skills they need to make health and lifestyle decisions
- Working to address the unique challenges faced by our most vulnerable communities

But understanding our community's priorities is only part of the solution – we also need to take action. That is why we have been engaging our staff in a strategic planning process to chart a direction moving forward. I know that when someone talks about strategic planning, eyes start glazing over, but it is the critical step by which we make sure that what we do in the Health Department is aligned with our community's priorities.

When a young mom comes to our WIC program for breastfeeding assistance or help assuring her kids' nutritional needs, we also need to identify her other needs. Maybe her children are not up-to-date on their vaccinations. Perhaps she needs to get family planning services for herself or her partner. Maybe she needs information about how to protect her kids from flu or whooping cough or even how to license her dog. We need to listen to what our clients need and connect them to those services.

This kind of integrated service delivery is a big challenge because we have nearly 400 employees who are visible working in the community in many, many different settings. To get everyone at the Health Department on the same page, we are kicking off a five-year strategic action plan that integrates the Healthy Pima community priorities into our daily work. We do not expect it to be easy. Change is difficult and in doing this work we found some gaps, we identified opportunities to improve what we do, and we re-discovered a great Health Department team that is committed to making it happen.

Let me bring in one more eye-glazing word – accreditation. Here is why it matters. Only 31 health departments across the country have met the high standards required to obtain this recognition from the Public Health Accreditation Board. This means when a client comes into an accredited department, they are assured high-quality services. We want to be the first county health department in Arizona to become accredited. And we cannot become accredited without showing not only that we listen to our community, but that we have a plan to address their needs, and a strategy to put the plan into action.

Finally, and perhaps most importantly, the County Administrator and senior leadership are committed to helping the Health Department realize its strategic plan. They have done so by incorporating key strategic themes and concepts throughout the ten-year Pima County comprehensive planning process known as Pima Prospers.

We have already started making changes, refining our work, and in general getting it done. This is how we create a healthy Pima County: Every one. Every where. Every day.

Sincerely,

Francisco García, MD, MPH
Director and Chief Medical Officer
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Approved this ____________ day of ____________ March ____________ 2014

Francisco García, MD, MPH, Director & Chief Medical Officer

www.pima.gov/health
Our Approach

Strategic planning is a process that allows us to critically evaluate all aspects of our department so we can learn, grow, and improve. Through this process, we developed a common vision, mission, and direction to guide our work ahead. Strategic planning helps us to nurture creative problem-solving and decision-making, align our resources with the priorities of the community, and assure accountability and performance. A strategic plan is our road map that guides us from where we are now to where we would like to be in the future. It defines our priorities, roles, responsibilities, and direction. It is a template for our work moving forward.

From 2011 to 2014, the Pima County Health Department (PCHD) engaged in a comprehensive strategic planning process to chart our path and define how we are going to work together to identify and address our community’s public health needs. Our planning efforts were based on the Ten Essential Public Health Services as well as the work of Healthy Pima, a countywide community health assessment and improvement planning initiative. This is our journey of how we, as a department, worked together to develop our strategic plan.

How We Began

National public health accreditation through the Public Health Accreditation Board (PHAB) launched in September 2011 with the intent to advance quality and performance within public health departments. The accreditation process provides a means for public health departments to identify performance improvement opportunities, improve management, develop leadership, and strengthen relationships with the community. Engaging in this process will create public trust that we are providing high quality services, implementing best practices, and improving our population health outcomes.

Our department is preparing to become one of the first accredited public health departments in Arizona.
As part of this effort, we strengthened our focus on quality improvement to ensure that our department is efficiently and effectively using its resources. One of our first steps was to develop a strategic plan, which is an important organizational tool of improvement. Beginning in fall 2011, we formed an internal team to guide our strategic planning efforts, and solicited the assistance of consultants to help us facilitate the process.

The Four Phases

We used a phased approach in our strategic planning efforts to ensure the process was comprehensive, integrated, and inclusive. This approach to strategic planning led to a number of departmental benefits:

- Development of a clear and concise vision, mission, and aspirational tenets
- Focus and clarity of the Ten Essential Public Health Services
- Alignment with national public health accreditation standards and measures
- Training and coaching opportunities to enable and empower leadership to understand and apply process improvement skills
- Broad employee participation and engagement
- Clear and structured action plan for improvement

The four phases of our strategic planning efforts and the purpose of each phase were:

**Phase 1: Strategic Operational Action Planning**
Assess our current way of doing business and identify improvements in our daily operations

**Phase 2: Trending and Assessing**
Identify internal and external trends, events, and factors that could potentially impact our ability to successfully provide public health services to our community

**Phase 3: Strategic Action Planning**
Recognize our strengths, weaknesses, opportunities, and threats as a department and determine our direction moving forward

**Phase 4: Department Alignment and Implementation**
Align our performance management system and quality improvement program to the strategic plan as well as begin to implement our annual work plan

Each of these phases utilized participatory methods, including Technology of Participation, Appreciative Inquiry, and Drucker Self-Assessment.
Alignment with Healthy Pima

Since 2010, PCHD has facilitated the development and implementation of Healthy Pima, a comprehensive community health assessment and improvement planning initiative in Pima County. An important result of this initiative was the identification of critical health priorities facing Pima County – healthy lifestyles, health literacy, access to care, and health equity – and the development of a community health improvement plan around which our community partners have mobilized.

We have created a clear and intentional link between the 2013-2017 Pima County Community Health Improvement Plan (CHIP) developed by Healthy Pima and our own strategic plan. The Healthy Pima initiative represents the voice of our community, and we honor this work by making the community’s priorities our own. Areas of the CHIP in which we have taken ownership and responsibility are woven throughout the goals, objectives, strategies, and activities of our plan. This will ensure our efforts are coordinated with the work undertaken by the Healthy Pima initiative.

Alignment with the Ten Essential Public Health Services

In preparing for public health accreditation, we adopted the Ten Essential Public Health Services framework. Through a series of activities, we engaged all department staff in discussions of the importance of using this framework and how our work fits in it. The end result of these activities was the identification of how all of our functions and program areas align with the Ten Essential Public Health Services, as depicted in the following graphic.
Strategic Planning Phases

Phase 1: Strategic Operational Action Planning

Phase 1 kicked off our strategic planning efforts with activities to assess our current way of doing business and to identify how we can make improvements in our daily operations. We began the process by forming an internal workgroup to consider our strategic operational direction.

Operational Assessment

A department operations review survey was developed and conducted in spring 2012 to gather staff perspectives on our department’s operational functions, support, and services. Over 60% of our staff completed the survey. The overall themes from this survey were that we have passionate staff, are doing great things as a department, but also face a number of departmental and economic challenges. The results from this survey provided the foundation of our operational action planning.

An operational review workshop took place in May 2012. Staff from various program areas, classification levels, and management participated in three days of strategic planning. Using the findings from the department operations review survey, staff reflected on areas the department is successful and identified infrastructure needs and barriers to providing services. Three internal operational priorities emerged from this work: leveraging department resources, enhancing our communication approach, and strengthening our workforce.

Operational Action Planning

We implemented a department-wide online survey in February 2013 asking staff to provide feedback on the development of a new vision, mission, and tenets. Over 70% of staff completed the survey and provided more than 240 write-in suggestions and comments. In March 2013, staff participated in a second workshop to develop strategies to guide implementation of our three operational priorities, which we later incorporated into our annual work plan. We also reviewed the findings from the survey and drafted and adopted a new department vision, mission, and tenets.
Phase 2: Trending and Assessing

Phase 2 of our strategic planning process allowed us to take a deeper look at the conditions in which our department provides public health, the community impact of our services, and our historical strategic planning processes. PCHD senior leadership and staff from all department programmatic areas were engaged in this work to ensure a comprehensive examination.

The Guide Team

This phase began in June 2013 with the formation of the Guide Team, a group of 20 people comprised of senior leadership, managers, supervisors, and public health professionals with diverse experience in the various programs and services we offer. The Guide Team was responsible for collecting, analyzing, and summarizing internal and external information to identify the trends, events, and factors that could potentially impact our ability to successfully provide public health services to our community. This team was divided into three subgroups to facilitate completion of the Environmental Scan, the Internal Summary, and the Client Demographic and Feedback Analysis reports. After four monthly Guide Team meetings and
biweekly subgroup meetings, these reports were finalized and distributed to all staff for review and analysis. These reports highlight the following topics.

### Report Highlights

<table>
<thead>
<tr>
<th>Environmental Scan</th>
<th>Internal Summary</th>
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<tbody>
<tr>
<td>• Pima County’s demographic and health status trends</td>
<td>• Historical summary of PCHD</td>
</tr>
<tr>
<td>• Priority health issues identified through community and stakeholder input</td>
<td>• Listing of mandated services</td>
</tr>
<tr>
<td>• Relevant cultural and social considerations</td>
<td>• Description of PCHD services</td>
</tr>
<tr>
<td>• Funding sources influenced by economic or legislative changes</td>
<td>• Current collaborations that influence population health outcomes</td>
</tr>
<tr>
<td>• Competition or duplication of public health services</td>
<td>• Pima County government and departmental administrative functions</td>
</tr>
<tr>
<td>• Current legislation and governmental policy that impact public health</td>
<td>• Current budget and financial management capacity</td>
</tr>
</tbody>
</table>

### Client Demographic and Feedback Analysis

- Collection, use, and analysis of PCHD client demographic and feedback data
- Five-year analysis of current trends in changing client demographics
- Assessment of department processes to collect client demographics and feedback
- Challenges in PCHD data infrastructure

### Leadership Perspective

During August 2013, our strategic planning consultant conducted confidential interviews with 16 internal and external leaders to gain a historical perspective of our department’s internal operations and strategic priorities and actions. This candid feedback echoed many of the themes identified in Phase 1, such as opportunities for enhanced communication, training, and internal and community collaboration. The insights that emerged from these interviews were considered throughout the strategic planning process and incorporated into the development of our strategic goals and objectives.
Prioritizing Our Essential Public Health Services

To ensure connection between our strategic plan and our organizational performance management system, the Strategic Planning Team developed and implemented a department-wide online survey in August and September 2013 to identify the performance standards to which we should hold our department accountable. The survey allowed staff to prioritize and select performance measures for our department from the National Public Health Performance Standards Program. Over 70% of PCHD staff participated in the survey, contributing more than 125 free text comments. The measures selected by staff serve as the foundation for alignment of our strategic objectives with the Ten Essential Public Health Services.

### Phase 2: Trending and Assessing

<table>
<thead>
<tr>
<th>Date</th>
<th>Key Activities</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>April – May 2013</td>
<td>Guide Team formation</td>
<td>Senior Leadership, Strategic Planning Team</td>
</tr>
<tr>
<td>June 3, 2013</td>
<td>Monthly Guide Team meetings</td>
<td>Guide Team, Strategic Planning Team</td>
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<tr>
<td>July 1, 2013</td>
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<td>August 5, 2013</td>
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<tr>
<td>October 7, 2013</td>
<td></td>
<td></td>
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<tr>
<td>June – October 2013</td>
<td>Environmental Scan, Internal Summary, and Client Demographic and Feedback Analysis report development (biweekly Guide Team subgroup meetings)</td>
<td>Guide Team, Strategic Planning Team</td>
</tr>
<tr>
<td>August 2013</td>
<td>Leadership perspective interviews</td>
<td>Senior Leadership, County Supervisors, Board of Health, County Administration</td>
</tr>
<tr>
<td>August – September 2013</td>
<td>Prioritizing our essential public health services survey</td>
<td>All Staff, Senior Leadership</td>
</tr>
<tr>
<td>October 2013</td>
<td>Distribution of Guide Team reports to all staff</td>
<td>Senior Leadership, Strategic Planning Team</td>
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</tbody>
</table>
Phase 3: Strategic Action Planning

Phase 3 of our strategic planning process focused on our strengths, weaknesses, opportunities, and threats (SWOT) as a department, and allowed us to identify our direction moving forward. During this phase, we engaged our staff in SWOT activities and held numerous workshops to develop our strategic goals, objectives, and annual work plan.

SWOT Analysis

During fall 2013, a copy of the Internal Summary, Environmental Scan, and Client Demographic and Feedback Analysis reports was distributed to staff. Program-specific group discussions were conducted with staff to review these reports and analyze departmental opportunities and challenges. These discussions were held so all staff had the opportunity to participate in department SWOT activities. A group discussion was also conducted with senior leadership, supervisors, managers, and the Guide Team. The following department SWOT emerged from these discussions.

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Weaknesses</th>
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<tbody>
<tr>
<td>- PCHD staff</td>
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<td>- PCHD leadership</td>
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<tr>
<td>- Community need of our support and leadership</td>
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<td>- Collaborative community partnerships</td>
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<td>- Ability to think critically and plan strategically</td>
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<tr>
<td>- Dedication to quality improvement and quality of care</td>
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<tr>
<td>- National public health accreditation</td>
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<tr>
<td>- Willingness to change and implement evidence-based practices</td>
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<td>- Creative and innovative problem-solving</td>
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<tr>
<td>- Support from County government</td>
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<tr>
<td>- Hardware and software infrastructure</td>
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<tr>
<td>- Data collection and utilization</td>
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<td>- Systematic approach for ensuring sustainable revenue</td>
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<tr>
<td>- Communication gap between PCHD and clinicians in the community</td>
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<td>- Fragmented delivery system</td>
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<tr>
<td>- Public awareness about PCHD roles, responsibilities, services, and success stories</td>
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<tr>
<td>- Awareness of what our clients value</td>
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<tr>
<td>- Support and will of our elected leaders</td>
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<tr>
<td>- External public health advocates</td>
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</table>

<table>
<thead>
<tr>
<th>Opportunities</th>
<th>Threats</th>
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<tbody>
<tr>
<td>- Improving, aligning, and streamlining client data</td>
<td></td>
</tr>
<tr>
<td>- Improving access and utilization of client data for assessment and program planning</td>
<td></td>
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<tr>
<td>- Developing department-level indicators to measure our results and successes</td>
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<tr>
<td>- Improving integration of services across our department</td>
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<tr>
<td>- Improving our working relationships with community partners, including physicians and veterinarians, to address critical health outcomes</td>
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<tr>
<td>- Addressing public health issues that are a priority to our community</td>
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<tr>
<td>- Developing innovative approaches to increase funding and resource diversification</td>
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<tr>
<td>- Lack of supervisor awareness about PCHD roles, responsibilities, services, and success stories in each supervisor district which could lead to lack of support and funding</td>
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<tr>
<td>- Tucson ranked 6th poorest of nation’s large metropolitan areas in 2011 by the Census Bureau</td>
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<tr>
<td>- Potential funding reductions at local, state, and levels could impact population-based public health services</td>
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<tr>
<td>- Decreased receptivity for community collaboration</td>
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<tr>
<td>- Cost of health care is rising and primary care treats individual, not the population at large</td>
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<tr>
<td>- Lack of community advocates to support collecting client fees for expanding revenue</td>
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Strategic Planning Workshops

Our strategic planning workshop was held in November 2013 to identify priority areas, goals, and objectives. Four subsequent action planning workshops were held in December 2013 and January 2014 to determine strategies to be implemented and to develop our annual work plan. At these workshops, participants worked in small and large groups, and used the findings from our operational planning, SWOT, internal summary, environmental scan, and client demographic and feedback analysis to develop our strategic direction.

Strategic goals, SMART objectives, strategies, and activities proposed during these workshops were later refined and adopted by PCHD senior leadership. Team leaders were identified for each strategy and are responsible for ensuring the implementation of the annual work plan. Additionally, staff were identified to implement the various activities contained within the annual work plan.

These workshops gave us the opportunity to consider, identify, and deliberate the strategic future of our department. This process allowed us to recognize the importance of prioritizing and implementing meaningful public health interventions, emphasizing community-based prevention, and improving population health outcomes. We were also able to build increased communication, coordination, and collaboration across our divisions and programs.

Community Partner and Stakeholder Review

During February and March 2014, our strategic plan was presented to our Board of Health and the Healthy Pima initiative for input. The Board of Health unanimously passed a motion to endorse and support the strategic plan while members of the Healthy Pima initiative expressed appreciation for the level of consideration used to develop our plan and the adoption of the Healthy Pima priorities as our own strategic priorities. Our Public Health Director officially adopted our strategic plan on March 31, 2014.
Phase 4: Department Alignment and Implementation

Phase 4 began in March 2014 to align our performance management system and quality improvement program to the strategic plan as well as to begin implementation of our annual work plan. This is a continuous phase that allows us to track, monitor, and revise our strategic activities.
Implementation of the Strategic Plan

As part of our performance management system and quality improvement program, PCHD will regularly collect information to evaluate if progress is being made towards the goals within our strategic plan. We will monitor the implemented changes and assess how well we are doing and how to improve. Results from this process will inform progress made towards our strategic plan, and assure we are effectively providing the essential public health services to our community.

We began implementing several of our strategic objectives in fall 2013. The Strategic Planning Team developed a quarterly progress and update form that has been provided to each team leader to monitor and track the activities in their strategy area. These quarterly progress and update reports are submitted to the Deputy Director at the end of each quarter. Additionally, senior leadership reviews progress of strategic plan activities and discusses successes and challenges on a monthly basis. A formal review of the strategic plan will occur at least annually.

Improving Our Performance

Our quality improvement program incorporates both department-wide and program-specific initiatives, and is tied directly to strategies and activities in our strategic plan. Current department-level quality improvement efforts address workforce development, customer service and leadership development, and implementation of an electronic health records system. Current program-specific quality improvement efforts address access to PCHD services, collection and management of client data, and assessing client needs and feedback. Our quality improvement plan describes in more detail what these efforts are, how they are tied to our strategic plan, and how our Quality in Action Team is tasked with monitoring performance measures and quality improvement efforts.

<table>
<thead>
<tr>
<th>Date</th>
<th>Key Activities</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>In process beginning</td>
<td>Implementation of annual work plan</td>
<td>Senior Leadership</td>
</tr>
<tr>
<td>March 2014</td>
<td></td>
<td>Strategic Workplan Leads</td>
</tr>
<tr>
<td>In process beginning</td>
<td>Alignment of performance management system and quality</td>
<td>Senior Leadership</td>
</tr>
<tr>
<td>March 2014</td>
<td>improvement program with strategic plan</td>
<td>Quality In Action Team</td>
</tr>
</tbody>
</table>
Our Strategic Plan
Vision, Mission, & Aspirational Tenets

Vision

A Healthy Pima County
Everyone. Everywhere. Every day.

Mission

The mission of the Pima County Health Department is to ensure the health, safety, and well-being of our community through leadership, collaboration, and education.

Aspirational Tenets

Client-focused
We use our abilities and resources to address our clients’ needs.
We treat the diverse populations we serve with compassion and respect.

Community-centered
We identify emerging health issues and priorities in response to stakeholder feedback.
We reflect community values by providing strong leadership and developing collaborative partnerships.

Evidence-based
Scientific knowledge is the foundation of our policies and programs.
Our decision-making is based on credible data grounded in the best available practices.

Integrated
We recognize the complexity of our clients’ lives and honor our responsibility to address their needs in a holistic fashion.
Our programs, services, and community resources are seamlessly connected and accessible.
Community Strategic Priorities

- **Access to Care**
  Improve access to medical, behavioral, and specialty health care services among urban and rural communities

- **Healthy Lifestyles**
  Promote and support healthy lifestyles

- **Health Literacy**
  Promote health literacy for all residents with emphasis on populations of need

- **Health Equity**
  An understanding of community assets, health conditions, and health status within our community to reduce health disparities
Goals and Objectives

**Goal 1:**
Facilitate access to care for all Pima County residents

**Objective 1:**
By 2019, increase the number of adult residents who have health insurance from 79% to 83% and the number of child residents who have health insurance from 88% to 94% as measured by the American Community Survey

**Objective 2:**
By 2016, establish a baseline of client-identified medical, dental, and/or veterinary homes

**Objective 3:**
By 2019, maximize program integration to meet the needs of our clients using a no wrong phone – no wrong door philosophy
Goal 2: Promote a safe, healthy, and prepared Pima County

Objective 1: By 2019, increase the percentage of Pima County residents who report their health as good or excellent from 83% to 85% as measured by the Behavioral Risk Factor Surveillance Survey.

Objective 2: By 2016, become reaccredited as a Project Public Health Ready department.
Goal 3: Stimulate collaboration across Pima County on issues of community health, safety, and well-being

Objective 1: By 2016, align all PCHD initiatives with the Ten Essential Public Health Services

Objective 2: By 2019, PCHD will be the leading source of public health information in Pima County

Objective 3: By 2017, all PCHD employees will be engaged with the community on issues of health, safety, and well-being
Goal 4:  
Grow and sustain a public health workforce that is prepared and knowledgeable

Objective 1:  
By 2019, establish a baseline of PCHD staff performance in public health core competencies as measured by the Core Competencies Self-Assessment and Training Preferences Survey

Objective 2:  
By 2019, establish a baseline of reported positive work environment and culture within PCHD

Objective 3:  
By 2019, 100% of PCHD managers and staff will demonstrate fiscal responsibility and awareness to stakeholders

Objective 4:  
By 2019, establish a baseline of the number of interns, volunteers, and other trainees within PCHD
# Pima County Health Department
## Strategic Map 2014–2019

### Guiding Principles

<table>
<thead>
<tr>
<th>Our Vision</th>
<th>Our Mission</th>
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</table>
| **A Healthy Pima County**  
Every one. Every where. Every day. | **To ensure the health, safety, and well-being of our community through leadership, collaboration, and education.** |

<table>
<thead>
<tr>
<th>Our Aspirational Tenets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client-focused • Community-centered • Evidence-based • Integrated</td>
</tr>
</tbody>
</table>

### Community Health Assessment & Improvement

<table>
<thead>
<tr>
<th>Healthy Pima Priorities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to Care • Healthy Lifestyles • Health Literacy • Health Equity</td>
</tr>
</tbody>
</table>

### Strategic Goals & Objectives

#### Goal 1: Facilitate access to care for all Pima County residents
1. Increase the number of adult and child residents who have health insurance
2. Establish a baseline of client-identified medical, dental, and/or veterinary homes
3. Maximize program integration to meet the needs of our clients using a no wrong door philosophy

#### Goal 2: Promote safe, healthy, and prepared Pima County
1. Increase the percentage of Pima County residents who report improved health
2. Become re-accredited as a Project Public Health Ready department

#### Goal 3: Stimulate collaboration across Pima County on issues of community health, safety, and well-being
1. Align all PCHD initiatives with the Ten Essential Public Health Services
2. Become the leading source of public health information in Pima County
3. Engage the community on issues of health, safety, and well-being

#### Goal 4: Grow & sustain a public health workforce that is prepared and knowledgeable
1. Establish a baseline of staff performance in public health core competencies
2. Establish a baseline of reported positive work environment and culture
3. Demonstrate fiscal responsibility and awareness to stakeholders
4. Establish a baseline of the number of interns, volunteers, and other trainees within PCHD

### Performance & Quality in Action Guiding Questions

<table>
<thead>
<tr>
<th>How do we hear from our community?</th>
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</thead>
<tbody>
<tr>
<td>How do we approach community problems?</td>
</tr>
<tr>
<td>Where do we want to be?</td>
</tr>
<tr>
<td>How do we know where we are?</td>
</tr>
<tr>
<td>How are we doing?</td>
</tr>
<tr>
<td>How can we do better?</td>
</tr>
<tr>
<td>How can we keep doing good things?</td>
</tr>
<tr>
<td>How do we share success stories &amp; challenges?</td>
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Moving Forward

Our strategic plan is dynamic and evolving. It is a living document, not a static or fixed plan. As we move through implementation and successfully achieve our objectives and strategies, we will incorporate new opportunities and challenges. Likewise, as we evaluate our work, we may change our direction to best serve our community. Our performance management system and quality improvement program will link our strategic plan and guide our efforts.

Work is already underway in a number of areas of our strategic plan. We have a lot of hard work ahead of us, and we consistently rise to the challenge. For us to be successful, we must continue to foster integration and collaboration across the department, engage our staff, and mobilize our community partners and stakeholders. Through this collaborative effort, we will create a healthy Pima County for everyone, everywhere, every day.

Thank you and Acknowledgements

We express our sincere appreciation to the Pima County Board of Supervisors, Board of Health members, County Administration, PCHD staff, members of the Healthy Pima initiative, and our community partners who participated in our strategic planning process for their invaluable insight, expertise, and commitment to a healthy Pima County.

PCHD Strategic Planning Team
Dr. Francisco Garcia, Director & Chief Medical Officer
Marcy Flanagan, Deputy Director
Alan Bergen, Senior Program Manager, Strategic Integration Team
Julia Flannery, Program Manager, Strategic Integration Team
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Garrett Hancock, Division Leader, Business Operations
Kim Janes, Division Leader, Pima Animal Care Center
Gladys Lopez, Administrative Services Manager, Human Resources
Kathleen Malkin, Division Leader, Public Health Nursing
Dr. Shauna McIsaac, Clinical Officer, Clinical Consultation Team
Louie Valenzuela, Division Leader, Strategic Integration Team
Anne Walker, Division Leader, Clinical Services
PCHD Guide Team
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Edmee Botwright, Nurse Manager, Public Health Nursing
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Brian Eller, Program Coordinator, Nutrition and Health Services
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Anne Walker, Division Leader, Clinical Services

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Honey Pivirotto, Assistant County Administrator for Health Policy
Amy Fish, Program Coordinator, Health Policy
Danna Whiting, Program Manager, Behavioral Health
Andrea Altamirano, Special Staff Assistant, Behavioral Health
Karen Crandall, Program Coordinator, Behavioral Health

Pima County Board of Health
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Richard Elias, Pima County Board Supervisor
Matthew T. Emich
Rene Castelum
Charles Geoffrion
Mary Lou Gonzales
Christina McComb Berger
Miguel Rojas
Dr. Gail Smith
**PCHD Workshop Participants**

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Erica Pearson, Office Support, Pima Animal Care Center  
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Erica Smith, Senior Program Manager, Clinical Services  
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Lynn Webster, Field Officer, Pima Animal Care Center  
Lisa Woodson, Epidemiologist, Strategic Integration Team
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Abby Eason  Celia Lopez  Elizabeth MacNeill  Jeanne Grant
Alan Bergen  Celine Baker  Ellie Beaubien  Jeannette Fair
Alan Roberts  Charlotte Watts  Elvira Comparan Granberry  Jeffery Carver
Alex Gutierrez  Cheryl Craig  Enma Ruiloba  Jeffery Terrell
Alyssa Caballero  Christine Valenzuela  Erica Lopez  Jennifer Chanca
Amanda Anderson  Christopher Meek  Erica Pearson  Jennifer Handlin
Amanda Sanchez  Claudia Baker  Erika Smith  Jennifer McDowell
Ana Angulo Gaxiola  Clementina Hernandez  Ernesteina Limon  Jennifer Neustadter
Ana Basurto  Connie Steinkring  Ernestine Perez  Jennifer Wilcox
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Andrea Verdin  Courtney Rhoades  Faye Libbey  Jessica Dalton
Andrei Parvan  Cris Young  Fernando Flores  Jessica Reck
Andrew Stocker  Cynthia Bennett  Fernando Silvas  Jessica Sandahl
Angela Kincaid  Cynthia Gonzalez  Francine Pita  Jessica Trueblood
Anissa Taylor  Daniel Annable  Francisco Garcia  Jill Hilder
Anne Walker  Daniel Lopez  Francisco Sanchez  Jim Backus
Annette Kane  Daniel Miranda  Frank Anaya  Joan Hall
Arthur Moore  Daniel Robledo  Frederick Espinosa  Jodi McCluskey
Audrey Rogers  David Hansen  Gabriela Arriaga  John Edwards
Azucena Huerta  Dawn Reeder  Garrett Hancock  John Henderson
Barbara Johnson  Deanna Gerdes  Gary Frucci  John Rademaker
Barbara Kremer  Deborah Alshuk Agriesto  Geraldine Amado  Jose Chavez
Barbara Oppenheimer  Deborah Weber  Geraldine Clark  Jose Luis Valenzuela
Beauty Adun  Deborah Windauer  Gilbert Gonzalez  Jose Ocano
Belinda Davis  Debra Morrow  Ginger Alexander Miller  Joshua Frits
Belinda Yslas  Debra Poe  Glenda Aguirre  Joyce Goeller
Bernadette Aranda  Debra Tenhate  Gloria Barrett  Joyce Stout
Bernadette Soto  Delia Franceware  Grace McClain  Julia Flannery
Bobbi Jo Snodgrass  Deline Attebery  Grace Mclothlin  Justin Gallick
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Brenda English  Dennis Downing  Gregory Rivera  Karen Murphy
Bret Sipe  Diane Escobar  Guadalupe Sanchez  Karin Merritt
Brian Eller  Diane Hiratsuka  Hector Juarez  Kathleen Mallin
Brian Mehren  Diane Toorayan  Helen Beach  Kathi Marie Ford
Briana Olsen Micali  Dina Pacheco Gonzalez  Hellen Beach  Kathleen Walton
Caillin Provencio  Donald Driver  Ivonne Lopez  Kathleen Wilsey Ankeny
Carlos Jaimez  Donald Gates  Jack Kincaid  Kay Howard
Carol Baker  Dora Torres  Jan Abington  Kelli Saline
Carolyn Louise Leake  Dustin Christo  Jane Froemel  Kelli Stephens
Carolyn Valdes  Eddie Loya  Jane Steuart  Kerry Carlson
Cassandra Wilkinson  Edmee Botwright  Janet Corley  Kevin Maxey
Catalina Ortiz Rodriguez  Elaine Klein  Janet Lara  Kim Janes
Catherine Nockels Gonzalez  Elena Martinez  Javier Herrera  Kimberly Bailey Ohl
Pima County Board of Supervisors

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