

NORTHERN NEVADA
Public Health

NNPH Strategic Plan Action Plan FY 2025
NNPH FY24-26 Strategic Plan Revisions (FY 2025)

The proposed changes are for any OUTCOMES and INITIATIVES in the NNPH FY24-26 Strategic Plan. Deletions appear as text with ~~strikethroughs~~, while additions will appear in red.

Strategic Priority 1: HEALTHY LIVES: Improve the health of our community by empowering individuals to live healthier lives

District Goal 1.1: Promote healthy behaviors to reduce chronic disease and injury.
Division Goal 1.1.1: Proactively prevent disease utilizing effective health education efforts including policy, systems and environmental strategies.
1.1.1.1 Reach at least 3,000 2,000 residents and visitors about the impact of secondhand cannabis smoke exposure through communications efforts. (# of residents reached)
District Goal 1.1: Promote healthy behaviors to reduce chronic disease and injury.
Division Goal 1.1.1: Proactively prevent disease utilizing effective health education efforts including policy, systems and environmental strategies.
1.1.1.4 Reach at least 4 groups or stakeholders with information on how smoke-free workplace policies impact overall community health. (# of partners that receive smoke-free workplace policy information)
1.1.1.4.1 Provide education and technical assistance to new and current community partners about smoke-free workplaces.
District Goal 1.1: Promote healthy behaviors to reduce chronic disease and injury.
Division Goal 1.1.1: Proactively prevent disease utilizing effective health education efforts including policy, systems and environmental strategies.
1.1.1.5 Reach at least 12 groups (youth, parents, service providers) with e-cigarette prevention messaging among youth and young adults.
1.1.1.5.1 Educate youth, parents, service providers, and decision-makers about the dangers of e-cigarette use among youth and young adults, and promote available cessation resources.
District Goal 1.2 Promote preventive health services that are proven to improve health outcomes in the community.
Division Goal 1.2.2 Reduce the spread of disease through proactive surveillance, monitoring and intervention.
1.2.2.8. 3 1 Collect, review, and process lab and provider reports for suspected or confirmed active TB disease.
1.2.2.8. 4 2 Utilize Directly Observed Therapy (DOT) and virtual DOT to assist with case treatment adherence.
1.2.2.8. 5 3 Establish partnerships with community providers to effectively communicate case management and treatment status.
1.2.2.8. 6 4 Utilize contact tracing for all sputum smear positive disease cases.

District Goal 1.2 Promote preventive health services that are proven to improve health outcomes in the community.
Division Goal 1.2.2 Reduce the spread of disease through proactive surveillance, monitoring and intervention.
1.2.2.11 Investigate 100% of foodborne, vector borne, vaccine preventable, disease of unusual occurrence, etc. disease cases within their designated time frame.
1.2.2.8-11.1 1.2.2.11.1 Complete update of the GCD manual chapters to support investigation process
1.2.2.8-11.2 1.2.2.11.2 Increase staff who are trained to take select high frequency diseases, in order to reduce burden on any one person or set of staff.
1.2.2.8-11.3 1.2.2.11.3 Ensure workflows are designed so staff know when a lab is reported so they can begin the investigation as soon as feasible.

District Goal 1.3 Improve access to health care so people of all means receive the health care services they need.
Division Goal 1.3.1 Assist clients with access to health insurance.
1.3.1.1 Maintain or increase the number of clients that see the Enrollment Assister annually.
1.3.1.1.2 Provide reminder calls for scheduled appointments with the Enrollment Assister.

District Goal 1.3 Improve access to health care so people of all means receive the health care services they need.
Division Goal 1.3.2 Build a bridge between communities, clients and services with community health workers.
1.3.2.1 Increase the number of clients and community members provided assistance with navigation of community resources. (# provided assistance)
1.3.2.1.2 Evaluate need for standardized referral process. Create a policy and procedure for referrals to the Community Health Worker.
1.3.2.1.3 Meet with intermittent hourly staff from each program to educate on services provided by CHWs. Create a SharePoint document accessible to all CCHS staff that describes the services the CHW can provide.

District Goal 1.3 Improve access to health care so people of all means receive the health care services they need.
Division Goal 1.3.2 Build a bridge between communities, clients and services with community health workers.
1.3.2.2 Increase community reach through new partnerships and outreach activities. (# of outreach activities)

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1.3.2.2.2 ~~Identify 2 new community outreach events to table.~~ **Conduct 4 outreach activities per month that promote services provided by CCHS to underserved communities.**

Strategic Priority 2: HEALTHY ENVIRONMENT: Create a healthier environment that allows people to safely enjoy everything Washoe County has to offer.

District Goal 2.1 Protect people from negative environmental impacts.
Division Goal 2.1.2 Maintain and improve air quality through planning and community education (Planning).
(VI)2.1.2.1a # of air quality plans and reports worked on during this period.
2.1.2.1a.1 Develop Ozone Mitigation Plan and submit to EPA for approval.
2.1.2.1a.2 Complete Dixie/Antelope Exceptional Event demonstration and submit to EPA for concurrence.
2.1.2.1a.3 Complete Dixie/Caldor Exceptional Event demonstraion and submit to EPA for concurrence.
2.1.2.1a.4 Complete Dixie/Tamarack Exceptional Event demonstration and submit to EPA for concurrence.
2.1.2.1a.5 Complete Mosquito Exceptional Event demonstraion and submit to EPA for approval.
2.1.2.1a.16 Develop Second 10 Year PM10 Maintenance Plan and submit to EPA for approval. Develop and complete 2023 triennial Emissions Inventory and submit to EPA
2.1.2.1a.72 Update 2024/2025 Ambient Air Monitoring Network Plan and submit to EPA for approval.
2.1.2.1a.83 Update 2014-2025 Air Quality Trends Report and present to DBOH for acceptance.

District Goal 2.1 Protect people from negative environmental impacts.
Division Goal 2.1.2 Maintain and improve air quality through planning and community education (Planning).
2.1.2.3 Complete updates of 11 parts of regulation chapters. Complete all necessary reviews and any associated updates to air quality regulations.
2.1.2.3.1 Update Chapter 020 – Parts 020.000 – 020.200 (3 parts)
2.1.2.3.1 Update Chapter 030 – Parts 030.000 – 030.500 (6 parts)
2.1.2.3.2 Update Chapter 040 – Asbestos Control Standards and Asbestos Acknowledgements (2 parts)

District Goal 2.1 Protect people from negative environmental impacts.
Division Goal 2.1.2 Maintain and improve air quality through planning and community education (Planning).
(VI) 2.1.2.4 Number of regulations reviewed

District Goal 2.1 Protect people from negative environmental impacts.
Division Goal 2.1.3 Reduce negative health impacts from regulated air pollutants in Washoe County. (Permitting & Compliance)

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2.1.3.7 100% of stationary source authority to construct/permit to operate permits are issued within 180 days.

2.1.3.7.2 ~~Reissue permits to operate on an annual basis to sources of regulated air pollutants in Washoe County.~~ **Renew permits to operate to sources of regulated air pollutants in Washoe County**

District Goal 2.1 Protect people from negative environmental impacts.

Division Goal 2.1.5 Reduce negative environmental health impacts associated with development and infrastructure.

2.1.5.2 Ensure 90% of residential septic and well plan reviews meet ~~jurisdictional timeframe~~ **a 2-week turnaround**

2.1.5.2.1 Build record types for Land Development Program in Accela by the end of FY~~24~~**25**

2.1.5.2.2 Update Land Development regulations and set a schedule for updating by the end of FY~~24~~**25**

2.1.5.2.3 Update SOPs and develop standardized comments by the end of FY~~24~~**25**

2.1.5.2.5 Establish training requirements for programs and provide staff the opportunity to attend.

District Goal 2.1 Protect people from negative environmental impacts.

Division Goal 2.1.5 Reduce negative environmental health impacts associated with development and infrastructure.

2.1.5.3 Conduct a minimum of 4 ~~3~~ outreach events to inform interested stakeholders on residential septic and wells. (# of outreach events)

District Goal 2.1 Protect people from negative environmental impacts.

Division Goal 2.1.5 Reduce negative environmental health impacts associated with development and infrastructure.

2.1.5.4 Complete 100% of inspections at UST permitted facilities per year.

2.1.5.4.1 ~~Establish training requirements for programs and provide staff the opportunity to attend.~~ **Establish training program or standards for new staff in Solid Waste Management and Underground Storage Tank (UST) programs**

2.1.5.4.3 ~~Create checklist/tools to assist permit holders with compliance.~~ **Assess success of permit holder educational tools**

District Goal 2.2 Keep people safe where they live, work and play.

Division Goal 2.2.1 Improve safety of residents through education, inspections and enforcement.

2.2.1.1 Set a baseline for the occurrence of foodborne illness risk factors in inspected facilities.

2.2.1.1.2 ~~Complete the 2023 Food Safety Risk Factor Assessment~~ **Complete the final report and determine intervention strategies based on results from the 2023-2024 Risk Factor Assessment**

District Goal 2.2 Keep people safe where they live, work and play.

Division Goal 2.2.1 Improve safety of residents through education, inspections and enforcement.

(VI) 2.2.1.2e # of temporary food permits

(VI) 2.2.1.2fe # of complaints responded to.

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(VI) 2.2.1.2g 1# of other permitted facilities

(VI) 2.2.1.2f # of other permitted commercial facilities (including childcares, schools, pools, hotels/motels, RV parks, mobile home parks, and dump stations)

District Goal 2.2 Keep people safe where they live, work and play.

Division Goal 2.2.1 Improve safety of residents through education, inspections and enforcement.

(PI) 2.2.1.4 Number of permitted facility (non-food based) programs with the foundation necessary to complete risk based inspections from 0 to 1. (programs developed)

District Goal 2.2 Keep people safe where they live, work and play.

Division Goal 2.2.1 Improve safety of residents through education, inspections and enforcement.

(VI) 2.2.1.4a % of passing inspections for routine food inspections

2.2.1.4a.1 Evaluate the effectiveness of the AMC program and operator recidivism

District Goal 2.2 Keep people safe where they live, work and play.

Division Goal 2.2.1 Improve safety of residents through education, inspections and enforcement.

(VI) 2.2.1.4b % of passing inspections for routine commercial facility inspections (including childcares, schools, pools, hotels/motels, RV parks, mobile home parks, and dump stations)

~~2.2.1.4b.1 2.2.1.4.1 Pool & Spa program finalized in Accela and in use (complete draft review of pool regulations, finalize working drafts of pool regulations, provide outreach, draft field guide, host public workshops, boards for approval, finalize working drafts of pool regulations).~~
 Update Pool & Spa regulations to reflect current design and construction

~~2.1.1.4b.2 2.2.1.4.2 PACC program finalized in Accela and in use (finalize inspection form, upload form into Accela, finalize field guide, develop guidance documents).~~ Establish Childcare regulations and other documentation necessary for program success (inspection form, field guide, guidance documents, etc.)

District Goal 2.2 Keep people safe where they live, work and play.

Division Goal 2.2.1 Improve safety of residents through education, inspections and enforcement.

2.1.1.5a.1 Establish training program or standards for new staff in Permitted Facilities

District Goal 2.2 Keep people safe where they live, work and play.

Division Goal 2.2.1 Improve safety of residents through education, inspections and enforcement.

(VI) 2.2.1.5b # of non food-based facility permits

(VI): 2.2.1.7c % of public water systems in compliance with lead and copper rule revisions

(VI): 2.2.1.7d % of sanitary surveys for year with a significant deficiency

District Goal 2.2 Keep people safe where they live, work and play.

Division Goal 2.2.1 Improve safety of residents through education, inspections and enforcement.

2.2.1.7 Complete 100% of required sanitary surveys of public water systems to help ensure proper public health protection.

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~~2.2.1.7.1 Establish training requirements for programs and provide staff the opportunity to attend.~~ **Establish training program or standards for new staff in Land Development and Safe Drinking Water**

~~2.2.1.7.2 Update chemical compliance templates and SOPs.~~

~~2.2.1.7.3 Implement continuous verification process for possible water systems.~~

~~2.2.1.7.42 Conduct outreach to public water systems on upcoming lead and copper rule revisions.~~ **Achieve 100% compliance with lead and copper rule revisions for Washoe County Public Water Systems**

District Goal 2.2 Keep people safe where they live, work and play.

Division Goal 2.2.2 Reduce the Spread of vector-born disease.

~~2.2.2.2a.1 Transition to drone treatment.~~

District Goal 2.2 Keep people safe where they live, work and play.

Division Goal 2.2.2 Reduce the Spread of vector-born disease.

~~2.2.3.1 Ensure 90% of first review for commercial plans meet jurisdictional deadlines.~~ **meet a 2-week turnaround**

2.2.3.1.2 Establish training program or standards for new staff in Commercial Plan Review

Strategic Priority 3: LOCAL CULTURE OF HEALTH: Lead a transformation in our community's awareness, understanding and appreciation of health resulting in direct action.

District Goal 3.1 Ensure community access to actionable public health information via website, media and social media.
Division Goal 3.1.1 Update public-facing digital presence on website and social media and implement targeted outreach to under-served populations.
(VI) 3.1.1.1a # total social media posts in English and Spanish
District Goal 3.1 Ensure community access to actionable public health information via website, media and social media.
Division Goal 3.1.1 Update public-facing digital presence on website and social media and implement targeted outreach to under-served populations.
3.1.1.2 Increase audience growth by across all platforms by 10%. (followers)
3.1.1.2.1 Launch LinkedIn profile.
District Goal 3.1 Ensure community access to actionable public health information via website, media and social media.
Division Goal 3.1.1 Update public-facing digital presence on website and social media and implement targeted outreach to under-served populations.
3.1.1.3 Increase Spanish language Facebook followers by 5%
District Goal 3.1 Ensure community access to actionable public health information via website, media and social media.
Division Goal 3.1.1 Update public-facing digital presence on website and social media and implement targeted outreach to under-served populations.
3.1.1.3.4 Increase engagement on all impressions across all social media posts by 10%. (comments, shares, link, clicks and more)
3.1.1.3.4.1 Create and post videos and graphic design content to drive engagement.
District Goal 3.1 Ensure community access to actionable public health information via website, media and social media.
Division Goal 3.1.2 Position the Health District to be the trusted, reputable source of public health information for our community.

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(PI) 3.1.2.1 Garner 1 million impressions through rebranding effort. (# of rebranding effort impressions)
3.1.2.1.1 Launch new website.
3.1.2.1.2 Execute outreach plan.
3.1.2.1.3 Implement outdoor signage.
3.1.2.1.4 Advertise buy.
3.1.2.1.5 Update style guide.
3.1.2.1.6 Maintain brand standards internally.

District Goal 3.1 Ensure community access to actionable public health information via website, media and social media.
Division Goal 3.1.2 Position the Health District to be the trusted, reputable source of public health information for our community.
(PI) 3.1.2.21 Reach at least 10,000 people per quarter through paid media featuring equity content promoted by WCHD. (# of people reached through paid media featuring equity content) Collaborate with at least 2 grant-funded programs to execute marketing tactics that reach populations experiencing health disparities
3.1.2.2.1.1 Maintain and increase Spanish language presence on live media and on Spanish-language radio. (HE Plan Goal 4, Initiative 2) Maintain and increase Spanish language earned media
3.1.2.2.1.2 Implement public information campaigns designed to promote health equity and reduce health disparities. Include 5210 Healthy Washoe and other campaigns targeting co-morbidities of COVID. (HE Plan Goal 4, Initiative 1)
3.1.2.2.1.3 Identify opportunities to utilize grant funds to promote health equity and reduce health disparities

District Goal 3.1 Ensure community access to actionable public health information via website, media and social media.
Division Goal 3.1.2 Position the Health District to be the trusted, reputable source of public health information for our community.
(VI) 3.1.2.5b # of community presentations (AQM)
(VI) 3.1.2.5 e # of community presentations (CCHS)
(VI) 3.1.2.5 d # of community presentations (EPHP)
(VI) 3.1.2.5 e # of community presentations (EHS)

District Goal 3.2 Inform the community of important community health trends by capturing and communicating health data.
Division Goal 3.2.1 Increase data integrity and data standardization.
(PI) 3.2.1.1 Process 90% of vital records requests and services within 96 hours.
3.2.1.1.5 Update the vital statistics manual to incorporate NETSMART system updates and processing

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District Goal 3.2 Inform the community of important community health trends by capturing and communicating health data.

Division Goal 3.2.2 Regularly share timely public health data and trends with the community.

3.2.2.1 Publish 100% of reports (Communicable Disease Annual; CPO Quarterly; Covid-Bi-Weekly; ILI Weekly) provided to the community based on designated time frame.

3.2.2.1.1 ~~Build~~ **Maintain** a tracking mechanism to know which reports were released on which dates.

3.2.2.1.2 ~~Increase staff who are trained to take select high frequency diseases, in order to reduce burden on any one person or set of staff.~~ **Explore merging COVID-19 data in ILI reports.**

District Goal 3.2 Inform the community of important community health trends by capturing and communicating health data.

Division Goal 3.2.3 Build the capacity of the health district to process data.

3.2.3.1 Deliver on 95% of requests for statistical analysis. (# of requests)

3.2.3.1.2 Maintain statistical capacity to serve EPHP and ~~the WCHD~~ **NNPH**

District Goal 3.3 Drive better health outcomes in Washoe County through improved public health systems and policies.

Division Goal 3.3.1 Advocate for state and local policies that positively impact public health using a health in all policies framework.

(VI) 3.3.1.1a # of interim committee meetings, public workshops, and coalition meetings attended/monitored.

3.3.1.1a.1 Generate a list of potential ~~2025~~ **2027** legislative priorities.

Strategic Priority 4: IMPACTFUL PARTNERSHIPS: Extend our impact by leveraging collaborative partnerships to make meaningful progress on health issues.

District Goal 4.1 Support and promote behavioral health.
Division Goal 4.1.2 Contribute to a decrease in the incidence of suicide in Washoe County.
(PI) 4.1.2.1 Pilot the Zero Suicide Program in 2 CCHS clinic programs.
4.1.2.1.1 Facilitate at least 2 suicide prevention training opportunities and assist with the creation and implementation of program-specific suicide prevention internal procedures.
4.1.2.1.2 Identify at least one community partner to accept warm hand-offs for Community and Clinical Health Services clients determined at risk of suicide.
District Goal 4.1 Support and promote behavioral health.
Division Goal 4.1.2 Contribute to a decrease in the incidence of suicide in Washoe County.
4.1.2.1 2 Implement at least one lethal means reduction strategy in coordination with the Washoe County Lethal Means Coalition Washoe Suicide Prevention Alliance .
4.1.2.1 2 .1 Facilitate the formation and operation of the Washoe Suicide Prevention Alliance Lethal Means Coalition in Washoe County , and collaborate with local and state stakeholders.
District Goal 4.1 Support and promote behavioral health.
Division Goal 4.1.3 Support collaborative local and state efforts to reduce the negative impacts of substance use and misuse and support individuals with substance use disorder.
(VI) 4.1.3.2a # of organizations participating in the substance abuse task force
(PI) 4.1.3.2 Reach at least 4 additional local organizations to participate in quarterly Washoe County Substance Abuse Task Force partner meetings focusing on reducing drug-related overdoses in Washoe County.
4.1.3.2.1 Coordinate and schedule at least 6 presentations during SATF meetings of exemplary strategies and emerging best practices in the field of SUD and drug-related overdose prevention.
4.1.3.2.2 Coordinate sharing of local drug-related overdose statistics, trends and prevention activities and initiative updates in at least 6 instances among SATF participants.
District Goal 4.2 Advance efforts to improve health living behaviors with an emphasis on prevention.
Division Goal 4.2.1 Develop and maintain collaborative community initiatives to increase access to prevention activities and resources.

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4.2.1.2 Expand the number of sites that are implementing the 5210 Healthy Washoe program from 5 to 10 from 5 to 7 elementary schools.

District Goal 4.3 Advance efforts to improve access to health care.

Division Goal 4.3.1 Support collaborative local and state efforts to increase access to health care for residents of Washoe County.

(PI) 4.3.1.2 Create 1 new coalition to increase the number of individuals in Washoe County covered by health insurance.

~~4.3.1.2.2 Complete 2023 health insurance enrollment campaign.~~

District Goal 4.4 Improve targeted elements of social determinants of health that negatively impact the health of residents.

Division Goal 4.4.1 Develop and maintain collaborative community initiatives to improve housing, employment, education, poverty, or other upstream conditions that negatively impact health.

(PI) 4.4.1.1 Serve an average of 500 seniors monthly through all Golden Groceries pantries in Washoe County.

~~4.4.1.1.1 Promote access to existing Golden Grocery Client Choice pantries in Washoe County.~~

District Goal 4.6 Engage the community in public health improvement.

Division Goal 4.6.1 Engage the community in assessing community health needs.

4.6.1.1 Increase community access to CHA data via online dashboard from 0 to 500. (# of web visits)

~~4.6.1.1.1 Work with TMT to develop a dashboard.~~

4.6.1.1.1 Maintain a dashboard with CHA indicators as data.

District Goal 4.6 Engage the community in public health improvement.

Division Goal 4.6.2 Engage the community in planning for community health improvement with a focus on disparate health outcomes.

(PI) 4.6.2.4 Increase the number of partners representing underserved parts of our community collaborating in CHIP initiatives by 5 partners. participating in CHIP initiatives from 2 to 8. Address at least three gaps to improve disparate health outcomes by involving partners that represent underserved communities.

~~4.6.2.4.1 Build partnerships through community based meetings, discussions with community leaders and events. (HE Plan Goal 3, Initiative 1)~~ Expand the number of partners representing underserved parts of our community collaborating in PSE and/or health equity initiatives.

District Goal 4.6 Engage the community in public health improvement.

Division Goal 4.6.2 Engage the community in planning for community health improvement with a focus on disparate health outcomes.

4.6.2.5 Maintain the number of individuals who provide input to the CHIP. (# of people at Steering Committee, subcommittee meetings, and planning meetings)

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4.6.2.5.1 Engage community members in the decision-making process to update initiatives for year ~~23~~.

District Goal 4.6 Engage the community in public health improvement.

Division Goal 4.6.2 Engage the community in planning for community health improvement with a focus on disparate health outcomes.

~~(PI) 4.6.2.7 Maintain a network of relationships with key organizations and leaders, and address at least 3 gaps in relationships to address disparate health outcomes.~~ (VI) 4.6.2.7a # of relationships maintained with priority contacts.

~~4.6.2.7.1 Identify, pilot and implement a system to track health equity relationships with key community partners and leaders.~~

~~4.6.2.7.2 Establish participatory leadership opportunities for community members to influence public health through the CHIP Steering Committee, CHIP initiative subcommittees, Health District Advisory Boards, and/or Health District Hearing Boards or other opportunities.~~

District Goal 4.6 Engage the community in public health improvement.

Division Goal 4.6.2 Engage the community in planning for community health improvement with a focus on disparate health outcomes.

(VI) 4.6.2.8 # of new relationships built with key organizations, programs, and leaders.

District Goal 4.6 Engage the community in public health improvement.

Division Goal 4.6.3 Facilitate community engagement in public health improvement initiatives designed to improve health outcomes and/or reduce health disparities utilizing community organizing principles.

4.6.3.1 Identify at least 3 initiatives or projects for divisions to work with **the health equity team and/or community-based partners to impact health disparities.** ~~community-based partners to impact health disparities.~~

District Goal 4.7 Improve the ability of the community to respond to health emergencies.

Division Goal 4.7.1 Improve public health emergency preparedness.

~~4.7.1.1 Execute a Chemical Surge Exercise~~ regional emergency response exercise with regional healthcare partners and finalize After Action Report within 90 days following.

District Goal 4.7 Improve the ability of the community to respond to health emergencies.

Division Goal 4.7.2 Improve health care emergency preparedness.

4.7.2.1 Complete 75% of planned activities identified by the IHCC.

~~4.7.2.1.3 EMS/FIRE Planned Activities: MCI Plan Updates and Interagency training with law enforcement.~~ EMS/Fire Planned Activities: MCI plan updates, Interagency training with law enforcement, MAEA, and MCI training and exercises

~~4.7.2.1.4 Hospital Planned Activities: Training and Exercising the MAEA and MCI plans.~~ Hospital Planned Activities: MAEA and MCI training and exercising, Business Continuity Recovery/Down-Time Planning, and CHEMPACK Training

~~4.7.2.1.5 Skilled Nursing/Memory Care/Assisted Living Planned Activities: Evacuation planning/training and staff and resource sharing plan.~~ Skilled Nursing/Memory Care/Assisted

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Living Planned Activities: Evacuation Planning/Training, Staff and Resources Sharing Plan, Cybersecurity Plan, and Exercise Plan
4.7.2.1.6 Clinic/Ambulatory Surgery Center Planned Activities: COOP, Recovery/Business Continuity Planning; Staff and Resource Sharing Plan; Emergency Operations Planning; Staff and Resource Sharing Planning. Clinic/Ambulatory Surgery Center Planned Activities: Recruitment, Emergency Operations Planning, Surge Capacity Planning, Staff and Resource Sharing Planning
4.7.2.1.7 Home Health/Hospice Planned Activities: Information Sharing/Communications Plan and Exercise Plan. Home Health/Hospice Planned Activities: Data Collection Exercises, Incorporate lessons learned from real-world example, Exercise Plan
4.7.2.1.8 Public Health Planned Activities: MCI/MAEA Plan updates and Shelter Support Plan. Public Health Planned Activities: MAEA updates and Cybersecurity exercises

District Goal 4.7 Improve the ability of the community to respond to health emergencies.
Division Goal 4.7.2 Improve health care emergency preparedness.
4.7.2.2 Implement 1-2 strategies from the jurisdictional risk assessment
4.7.2.2.1 Complete a Project Health Ready review
4.7.2.2.2 Collaborate with the State of Nevada to coordinate behavioral health efforts

District Goal 4.8 Partner with academia to advance public health goals.
Division Goal 4.8.1 Maintain Academic Health Department with the University of Nevada, Reno.
4.8.1.1 Initiate at least one new project collaboration with UNR per year. (# project collaborations)
4.8.1.1.3 Increase research resources through identifying shared resources.
4.8.1.1.3 Identify joint research opportunities and joint grant funding resources.
4.8.1.1.4 Identify training opportunities for WCHD NNPH staff through UNR.
4.8.1.1.5 Maintain the continuity of and improve joint course on real-world public health applications.
4.8.1.1.6 Implement mentorship program between NNPH staff and UNR students.

Strategic Priority 5: ORGANIZATIONAL CAPACITY: Strengthen our workforce and increase operational capacity to support a growing population.

District Goal 5.1 Attract and retain a talented public health workforce to meet the needs of Washoe County.
Division Goal 5.1.1 Create a positive and productive work environment.
5.1.1.4 Increase percentage of employees who recommend WCHD NNPH as a good place to work from 76% to 78%.
5.1.1.4.2 Identify and provide ongoing opportunities for staff to provide input.
5.1.1.4.3 Support and implement an employee recognition program.
5.1.1.4.4 3 Create opportunities for staff to work across divisions on projects and task forces.
5.1.1.4.5 4 Provide onboarding program to integrate staff into WCHD the NNPH team.
5.1.1.4.6 Provide a quarterly orientation about the full organization to new employees.
5.1.1.4.7 5 Promote key takeaways activity. Promote relationship-building activities, including key takeaways.
5.1.1.4.6 Equip supervisors with the tools necessary to complete Employee Performance Evaluations on time.

District Goal 5.1 Attract and retain a talented public health workforce to meet the needs of Washoe County.
Division Goal 5.1.1 Create a positive and productive work environment.
5.1.1.5 Increase internal newsletter distribution to bi-weekly for FY25. transparent internal communications from 0 to 4.
5.1.1.5.1 Launch internal newsletter. (promote Tell Kevin, workforce development, budget)

District Goal 5.1 Attract and retain a talented public health workforce to meet the needs of Washoe County.
Division Goal 5.1.1 Create a positive and productive work environment.
(PI) 5.1.1.6 Implement at least 25% of the FY25-FY27 Workforce Development Plan and strategies

5.1.1.6.1 Develop WFD Plan and Implementation Strategies

District Goal 5.1 Attract and retain a talented public health workforce to meet the needs of Washoe County.

Division Goal 5.1.2 Focus on building staff expertise.

5.1.2.1 At least 50% of employees will report feeling proficient on targeted core competencies.

~~5.1.2.1.2 Identify 1-2 core competencies for trainings to include on pre-post assessments.~~

~~5.1.2.1.3~~ 2 Evaluate improvement on targeted core competencies as assessed by employees and supervisors.

5.1.2.1.43 Train DDs and supervisors on the budget process.

5.1.2.1.54 Provide FAQs for staff on budget process and grants.

5.1.2.1.65 Build out additional onboarding activities for supervisors over their first year.

District Goal 5.2 Meet and exceed national public health best practice standards.

Division Goal 5.2.1 Maintain National Public Health Accreditation.

5.2.1.2 Increase the number of QI projects implemented across the HD from 0 to ~~3~~ 2.

~~5.2.1.2.1 Establish and convene QI team.~~ Collaborate with QI Council to advance NNPH QI initiatives

~~5.2.1.2.2 Develop Implement a QI plan.~~

~~5.2.1.2.3~~ 2 Train staff about QI concepts and internal process.

5.2.1.2.43 Communicate with leadership, governing body, and stakeholders about QI activities.

5.2.1.2.4 Identify two projects using data from performance management system

District Goal 5.3 Invest in expanded Health District capacity and targeted services to meet the needs of a growing and diverse community.

Division Goal 5.3.1 Increase workforce capacity.

(VI) 5.3.1.1a # of filled positions (FT and PT employees)

~~(VI) 5.3.1.1c # of filled FT/PT employees~~

(VI) 5.3.1.1d # of internship opportunities at ~~WCHD~~ NNPH

5.3.1.1 Increase investment in personnel where workforce capacity is a barrier to productivity. (% increase in FTE)

5.3.1.1.1 Implement strategies to address findings of FPHS assessment ~~Update FPHS assessment for FY24~~ and work statewide to build the case for support for ongoing public health funding.

District Goal 5.3 Invest in expanded Health District capacity and targeted services to meet the needs of a growing and diverse community.

Division Goal 5.3.2 Increase organizational capacity to address health equity and reduce disparate health outcomes.

5.3.2.1 Make progress on the health equity plan by completing ~~8-10~~ initiatives.

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District Goal 5.3 Invest in expanded Health District capacity and targeted services to meet the needs of a growing and diverse community.

Division Goal 5.3.3 Recruit, retain and train a workforce that meets the diverse needs of our community.

(PI) 5.3.3.1 Review at least ~~10~~ 4 job descriptions to evaluate for systemic barriers to hiring a diverse workforce.

5.3.3.1.2 Annually review how the demographics of the health district workforce compare to the demographics of the community ~~we serve~~ NNPH serves. (HE Plan Goal 7, Initiative 3)

District Goal 5.3 Invest in expanded Health District capacity and targeted services to meet the needs of a growing and diverse community.

Division Goal 5.3.3 Recruit, retain and train a workforce that meets the diverse needs of our community.

5.3.3.2 100% of new staff will take asynchronous cultural competency training as part of the onboarding process.

5.3.3.2.1 ~~In partnership with the Larson Institute build, pilot and launch an asynchronous, online training designed specifically to build health equity competencies from the Council on Linkages and Public Health Practices. Require all new staff to complete within the first 180 days and offer to all existing staff regularly.~~

District Goal 5.3 Invest in expanded Health District capacity and targeted services to meet the needs of a growing and diverse community.

Division Goal 5.3.3 Recruit, retain and train a workforce that meets the diverse needs of our community.

(VI) 5.3.3.3a # of staff participating in district offered DEI/cultural competency professional development opportunities.

5.3.3.3a.1 ~~Offer district-wide diversity, equity, inclusion, cultural competency and/or health equity training to health district staff.~~ **Expand district-wide opportunities for staff to participate in diversity, equity, inclusion, cultural competency, and/or health equity training.**

District Goal 5.3 Invest in expanded Health District capacity and targeted services to meet the needs of a growing and diverse community.

Division Goal 5.3.3 Recruit, retain and train a workforce that meets the diverse needs of our community.

(VI) 5.3.3.4a ~~# of staff participating in informal opportunities to explore DEI, cultural competency and equity topics~~ **# of language accessibility initiatives implemented from the language access plan.**

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5.3.3.4a.1 ~~Continue and expand optional opportunities for staff to participate in dialogue and reflection on diversity and equity topics. (HE Plan Goal 1, Initiative 3)~~ **Adopt and implement an organization-wide language access plan.**

District Goal 5.4 Maximize and expand facilities to meet the needs of staff and clients.

Division Goal 5.4.2 Complete a facility expansion.

5.4.2.1 Ensure completion of new TB and expanded office space building. (Complete 3 steps - location identified, building design complete, contractor identified)

5.4.2.1.1 Confirm final location based on Washoe County Commissioners and County Manager decisions.

5.4.2.1.2 Support CSD in the approval of contractors and building design.

District Goal 5.5 Leverage technology to improve services, increase effectiveness and efficiency, and provide access to higher quality data.

Division Goal 5.5.1 Increase access to self-service platforms and systems.

5.5.1.2 Increase payments made via Accela. (EHS)

5.5.1.2.1 Ensure kiosk is set up and available to customers by August 1, 2023.

5.5.1.2.2 ~~Create written instructions by August 1, 2023.~~ **Transition vendors and promoters to (online only) Accela Citizen Access submittal process for Temporary Food Events by March 1, 2025 (90% submittal rate)**

5.5.1.2.3 ~~Create videos by September 1, 2023.~~ **Obtain 80% ACA account creation for annual permit holders by July 1, 2025**

5.5.1.2.4 Distribute public service announcements.

5.5.1.2.5 Add announcement to website.

5.5.1.2.6 Educate customers to help them understand how to submit payment via Accela by November 1, 2023.

5.5.1.2.7 Revise and communicate instructions with customers by October 1, 2023.

5.5.1.2.8 Communicate November 1, 2023 Accela launch date to customers via distribution lists, press releases, etc.

5.5.1.2.9 Monitor and document lessons learned.

District Goal 5.5 Leverage technology to improve services, increase effectiveness and efficiency, and provide access to higher quality data.

Division Goal 5.5.2 Improve data tracking and information sharing.

5.5.2.1 % of new/renewed sources integrated into the software.

5.5.2.1.1 Draft SOP for use of software by ~~January~~ **12/31/2024.**

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District Goal 5.5 Leverage technology to improve services, increase effectiveness and efficiency, and provide access to higher quality data.
Division Goal 5.5.3 Assure technology needs are addressed by a health district technology resource or County Technology Services.
(PI) 5.5.3.1 Monitor average time (in minutes) to close help desk ticket. Support new county ticketing system as appropriate
5.5.3.1.1 Establish help desk ticketing system workflow for employees.
5.5.3.1.2 Train employees on the help desk ticketing system workflow.
5.5.3.1.3 1 Track 100% of IT time by cost allocation.
5.5.3.1.4 2 Identify TS capacity dedicated to each division and identify workload capacity.
5.5.3.1.5 3 Track 100% of projects by category.
5.5.3.1.6 4 Work with TS to revamp ticket categories based on type and then track going forward.
5.5.3.1.7 5 Categorize help desk tickets to identify problem areas/projects where staff need support.
5.5.3.1.8 6 Create training for staff based on challenging areas identified.

Strategic Priority 6: FINANCIAL STABILITY: Enable the Health District to make commitments in areas that will positively impact the community's health through reliable and sustainable funding.

District Goal 6.1 Update the WCHDs NNPH's financial model to align with the needs of the community.
Division Goal 6.1.2 Capture grant and federal relief resources to meet public health goals. Pursue funding opportunities to promote health equity and address health disparities.
6.1.2.1 Maintain 100% compliance with purchasing and contract procedures.
6.1.2.1.1 Deliver and record 1 staff training on the purchasing and contract process.
6.1.2.1.2 Provide FAQs for staff.

District Goal 6.1 Update the WCHDs NNPH's financial model to align with the needs of the community.
Division Goal 6.1.2 Capture grant and federal relief resources to meet public health goals. Pursue funding opportunities to promote health equity and address health disparities.
6.1.2.2 Maintain 100% of grant compliance.
6.1.2.2.1 Meet with program managers to understand areas of opportunity to learn about grant process
6.1.2.2.2 Standardize training process to ensure staff is clear on grant process and compliance expectations.
6.1.2.2.3 Provide 1 training on grant compliance to staff.

District Goal 6.1 Update the WCHDs NNPH's financial model to align with the needs of the community.
Division Goal 6.1.3 Maximize revenue generated from cost recovery.

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6.1.3.1 Set a baseline for % of costs recovered for clinic services through client and third-party payer payments.

District Goal 6.1 Update the WCHDs NNPH's financial model to align with the needs of the community.

Division Goal 6.1.3 Maximize revenue generated from cost recovery.

6.1.3.4 Increase the percent of costs recovered through EHS fees.

6.1.3.4.1 Meet with admin staff at least quarterly to monitor fee trends and improve admin functions