NORTHERN NEVADA

Public Health

Serving Reno, Sparks & Washoe County

FY27-30 Strategic Plan

July 2026

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LETTER FROM THE BOARD CHAIR

On behalf of the District Board of Health, I am pleased to present Northern Nevada Public Health's Strategic Plan. This plan represents our shared commitment to protecting and improving the health of our community while preparing for the opportunities and challenges that lie ahead.

Public health is more than responding to emergencies or preventing disease, it is about creating the conditions that allow individuals, families, and communities to thrive. Achieving that vision requires thoughtful planning, strong partnerships, and a willingness to continuously adapt to the changing needs of our region. This strategic plan establishes a clear direction for our organization by focusing on the priorities that will have the greatest impact on community health. It reflects the collective efforts of our staff, leadership, community partners, and the District Board of Health, whose expertise and perspectives helped shape a roadmap that is both ambitious and achievable.

As a governing body, we are committed to ensuring Northern Nevada Public Health remains a trusted, accountable, and forward-thinking organization. We will continue to support investments in our workforce, strengthen the public health system, promote evidence-informed decision-making, and advocate for sustainable resources that allow our organization to meet the needs of our growing community.

This plan also reflects our commitment to accountability. By establishing measurable goals and regularly evaluating our progress, we can celebrate successes, identify opportunities for improvement, and remain responsive to the communities we serve.

The health of our community is a shared responsibility. Lasting progress depends on the collective efforts of residents, community organizations, healthcare providers, businesses, educators, and public agencies working toward common goals. We are grateful for the partnerships that make this work possible and look forward to continuing this important work together.

Thank you for your continued commitment to building a healthier, safer, and more resilient Northern Nevada.

City of Reno Councilman Devon Reese
District Board of Health Chair

LETTER FROM THE DISTRICT HEALTH OFFICER

As District Health Officer, I have the privilege of working alongside an extraordinary team of public health professionals who are dedicated to improving the health and well-being of our community. This strategic plan reflects that commitment and provides a framework for how we will continue to advance our mission in the years ahead.

The work of public health is constantly evolving. As our community grows and new opportunities and challenges emerge, we must continue to adapt, innovate, and strengthen the way we serve our residents. This strategic plan

provides a clear direction for our organization while remaining focused on delivering high-quality public health services and improving health outcomes for everyone in Northern Nevada.

The priorities outlined in this plan were shaped through collaboration with our employees, the District Board of Health, community partners, and residents. Their insights helped identify opportunities to build on our strengths, improve our systems, and focus our efforts where they can have the greatest impact. Together, we have established priorities that emphasize organizational excellence, a strong public health system, meaningful partnerships, and data-informed decision-making.

Successfully implementing this plan will require more than achieving individual objectives, it will require a culture of learning, innovation, and accountability. We are committed to using performance management and quality improvement to evaluate our progress, respond to emerging needs, and ensure our work continues to make a meaningful difference for the communities we serve.

I continue to be inspired by the dedication, expertise, and compassion of our employees. Every day, they work alongside community partners to prevent disease, promote health, protect our environment, prepare for emergencies, and address the many factors that influence health. Their commitment is the foundation of our success and will be essential to achieving the goals outlined in this plan.

No single organization can improve community health alone. Lasting progress depends on strong partnerships, shared responsibility, and a collective commitment to creating healthier communities. I am grateful for the collaboration of our partners and the trust of our residents, and I look forward to working together to build a healthier, safer, and more resilient Northern Nevada.

Chad Kingsley
Washoe County District Health Officer

MISSION AND VALUES

MISSION

To improve and protect our community's quality of life and increase equitable opportunities for better health.

VALUES

We are…	Which means…
Collaborative	**In unity there is strength** We believe in genuine collaboration and are committed to working together, combining resources, and sharing expertise to strengthen public health.
Adaptable	**Ever evolving and adapting**

	Public health is always changing. Flexibility is required. We continually push our capacity to adapt, evolve and adjust to new conditions to keep our community healthy and safe.
Trustworthy	**Doing right by the community** We'll earn your trust with honesty and integrity while consistently adhering to ethical principles. Our guidance is reliable, fact-based and in the best interest for all in Washoe County.
Inclusive	**Equity and inclusion for all** Our community is wonderfully diverse. Inclusion is our responsibility, and we will build and sustain an environment that is dedicated to improving health equity by recognizing and overcoming barriers.
Compassionate	**Caring for the health of the community** Our organization is dedicated to serving everyone in our community with compassion, kindness, dignity, and respect.

STRATEGIC PRIORITIES

1. **HEALTHY LIVES: Improve the health of our community by empowering individuals to live healthier lives.** The health of a community depends on the health of the individuals within it. A wide range of factors impact one's health. These factors include individual nutrition and lifestyle choices, socio-economic conditions, and health policy decisions. The aim of NNPH is to identify and address the most important factors contributing to the health of individuals within the community and implement solutions that allow people to live healthier lives.
2. **HEALTHY ENVIRONMENT: Create a healthier environment that allows people to safely enjoy everything Washoe County has to offer.** The external environment we interact with every day—the air we breathe, the water we drink, the buildings we work in—can impact the health of a community. The aim of NNPH is to monitor and maintain a safe natural and built environment so the community feels confident living, working, and playing anywhere in Washoe County.
3. **LOCAL CULTURE OF HEALTH: Lead a transformation in our community's awareness, understanding, and appreciation of health resulting in direct action.** Many of the decisions community leaders, organizations, and individuals make every day can impact the community's health. However, the community's health is not always a factor in the decision-making process. NNPH aims to work with the community to consider health implications in the decisions it makes.
4. **IMPACTFUL PARTNERSHIPS: Extend our impact by leveraging collaborative partnerships to make meaningful progress on health issues.** Many of the issues impacting the health and quality of life within Washoe County do not fall under NNPH's direct jurisdiction nor can they be addressed by a single organization. To make meaningful progress on these issues requires a community effort. The NNPH will extend its reach by working with key partners to identify and address health issues.
5. **ORGANIZATIONAL CAPACITY: Strengthen our workforce and increase operational capacity to support a growing population.** As the community grows, the service demands on NNPH will grow. To maintain and improve levels of service, the NNPH workforce needs to grow along with the community. By investing in the capabilities of the NNPH staff and creating a positive and productive work environment, NNPH will continually improve its ability to serve the community.
6. **ORGANIZATIONAL EFFECTIVENSS: Advance organizational excellence through continuous improvement, innovation, and data-informed practices that enhance the quality and efficiency of public health services.** Organizational effectiveness is the foundation of a modern public health agency. Through accreditation, continuous quality improvement, technology modernization, and data-informed decision-making, NNPH will strengthen organizational performance and ensure high-quality, responsive services for the communities it serves.
7. **FINANCIAL STABILITY: Enable Northern Nevada Public Health to make commitments in areas that will positively impact the community's health through reliable and sustainable funding.** Public health requires an up-front investment. The programs and services NNPH offers require resources to implement and those programs and services create value for the community over time. When funding is insufficient or unreliable, it limits the positive impact of NNPH. NNPH's aim is to have greater control over its finances to be able to better predict and control future funding levels.

STRATEGIC PRIORITIES AND GOALS WITH DIVISION OWNERSHIP

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.

District Goal: 1.2 Promote preventive health services that are proven to improve health outcomes in the community.

Division Goal: 1.2.1 Act as a safety net by providing accessible health services when/where community members otherwise may not have access.

Division Goal: 1.2.2 Reduce the spread of disease through proactive surveillance, monitoring and intervention.

Division Goal: 1.2.3 Increase confidence in vaccines among targeted racial and ethnic groups and individuals with disabilities through outreach and access to accurate information.

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 Build a bridge between communities, clients, and services with community health workers.

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: 2.1.1 Monitor ambient air to assess attainment status of the criteria air pollutants. (Monitoring)

Division Goal: 2.1.2 Maintain and improve air quality through planning and community education. (Planning)

Division Goal: 2.1.3 Reduce negative health impacts from regulated air pollutants in Washoe County. (Permitting and Compliance)

Division Goal: 2.1.4 Coordinate with state and local partners on waste reduction education, diversion education, and proper disposal.

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

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.

Division Goal: 2.2.2 Reduce the spread of vector-borne disease.

Division Goal: 2.2.3 Review building plans in advance to assure new facilities meet health standards.

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.

Division Goal: 3.1.2 Position the Health District to be the trusted, reputable source of public health information for our community.

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.

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

Division Goal 3.2.3: Build the capacity of the Health District to process data.

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.

Division Goal 3.3.2: Build, support and participate in coalitions to advance improved public health policies.

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

District Goal: 4.1 Strengthen the community's mental health system by improving prevention efforts that support mental health across the lifespan.

Division Goal: 4.1.1 Improve mental health outcomes for residents of Washoe County.

Division Goal: 4.1.2 Contribute to a decrease in the incidence of suicide in Washoe County.

District Goal: 4.2 Advance efforts to improve healthy 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.

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.

District Health 4.4 Strengthen community well-being by addressing economic factors that reduce barriers to health

Division Goal: 4.4.1 Develop and maintain collaborative community initiatives that influence health and well-being

District Goal: 4.5 Engage the community in public health improvement.

Division Goal: 4.5.1 Engage the community in assessing community health needs.

Division Goal: 4.5.2 Engage the community in planning for community health improvement with a focus on disparate health outcomes.

Division Goal 4.5.3: Facilitate community engagement in public health improvement initiatives designed to improve health outcomes and/or reduce health disparities utilizing community organizing principles.

District Goal: 4.6 Enhance the regional emergency medical services system.

Division Goal: 4.6.1 Provide EMS oversight to enhance system performance.

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.

Division Goal 4.7.2: Improve health care emergency preparedness.

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.

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 Maintain a stable and engaged workforce to support continuity of services

Division Goal: 5.1.2 Create a positive and productive work environment.

Division Goal: 5.1.3 Focus on building staff expertise.

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.

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

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

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

Division Goal: 5.4.1 Maximize the 9th Street facility to efficiently use and improve existing work and meeting spaces.

Division Goal: 5.4.2 Complete a facility expansion.

NEW Strategic Priority 6: ORGANIZATIONAL EFFECTIVENESS: Advance organizational excellence through continuous improvement, innovation, and data-informed practices that enhance the quality and efficiency of public health services.

	District Goal 6.1: Strengthen organizational performance through public health accreditation
	Division Goal 6.1.1: Maintain nation public health accreditation
All	Division Goal 6.1.2: Implement performance management and quality improvement practices that improve program effectiveness, demonstrate measurable outcomes, and support organizational excellence.
All	District Goal 6.2 Leverage technology to improve services, increase effectiveness and efficiency, and provide access to higher quality data.
	Division Goal 6.2.1: Improve the use of technology and data to support program operations
	District Goal 6.3: Improve the customer experience by enhancing service accessibility, responsiveness, and communication across NNPH programs.
	Division Goal 6.3.1: Use feedback and service standards to enhance the quality and timeliness of services.

Strategic Priority 7: FINANCIAL STABILITY: Enable the Health District to make commitments in areas that will positively impact the community's health through reliable and sustainable funding.

All	District Goal 7.1 Update NNPH's financial model to align with the needs of the community.
	Division Goal 7.1.1 Increase dedicated public health funding support to Washoe County.
	Division Goal 7.1.2 Capture grant and federal relief resources to meet public health goals. Pursue funding opportunities to promote health equity and address health disparities.
	Division Goal 7.1.3 Maximize revenue generated from cost recovery.
	Division Goal 7.1.4 Provide the DBOH the information necessary to provide financial oversight.

Key for Division Ownership

CCHS	Community and Clinical Health Services
AQM	Air Quality Management
EHS	Environmental Health Services
PHD	Population Health Division
AHS	Administrative Health Services
ODHO	Office of the District Health Officer

COMMUNITY HEALTH ASSESSMENT

The 2026 Community Health Assessment (CHA), developed through a partnership between Northern Nevada Public Health and Renown Health, provides a comprehensive, data-informed understanding of the health needs, strengths, and challenges of Washoe County. The assessment combines community input gathered through surveys, focus groups, interviews, and stakeholder conversations with data from more than 60 trusted sources to provide a clearer picture of the factors that influence health and well-being across our community.

Using an equity-centered approach, the CHA examines health outcomes, social determinants of health, and disparities among community populations to identify opportunities for action and investment. The assessment reflects the perspectives of community members and the expertise of partners across healthcare, education, social services, faith-based organizations, local government, and other sectors.

The findings from the CHA serve as a foundation for Northern Nevada Public Health's Community Health Improvement Plan (CHIP), guiding collaborative efforts to address priority health issues and improve outcomes across Washoe County. A key focus for Northern Nevada Public Health is increasing awareness, accessibility, and use of CHA data so that community partners, organizations, and decision-makers have a shared understanding of local health needs. By expanding access to this information and aligning efforts around common indicators, our community can work together more effectively to identify priorities, measure progress, and advance meaningful improvements in health.

Together, the CHA and CHIP provide a framework for data-driven decision-making, stronger collaboration, and coordinated action to improve the health and well-being of our community.

Topic	Score
Mental Health	4.95
Access to Healthcare	5.35
Economic Stability	7.20
Health Risk and Early Detection	9.45
Maternal and Child Health	9.60
Substance Use	9.90
Violence Prevention and Crime	10.15
Environmental Sustainability	10.35

Higher Priority

Lower Priority

COMMUNITY HEALTH IMPROVEMENT PLAN PROCESS

Following the completion of Community Health Assessment (CHA) data collection and analysis, NNPH and Renown Health convened a Community Health Forum in January 2026, bringing together more than 200 community leaders and partners representing diverse sectors across Washoe County. Participants reviewed CHA findings and engaged in a prioritization process to identify the most critical areas for collective action. Using criteria including opportunity, urgency, capacity, leverage, and momentum, participants evaluated potential focus areas. These results, combined with primary and secondary data findings, informed the selection of four priority areas that will guide the Community Health Improvement Plan (CHIP).

1. Mental Health

Goal: By 2029, reduce suicide-related harm and improve emotional well-being by decreasing the average number of poor mental health days and reducing suicide attempts among adults and youth through coordinated investments in prevention, behavioral health access, school partnerships, and community-based support programs.

Indicators:

- Intentional Injury (suicide) Mortality Rate
- Poor Mental Health: Average number of days
- High School Students who have attempted suicide: Past Year
- Middle School Students Who Reported Never/Rarely Getting Help When They Felt Sad, Empty, Hopeless, Angry, or Anxious

2. Access to Health Services

Goal: By 2029, improve access to preventive and routine healthcare services by increasing routine checkups, expanding insurance coverage, and increasing first trimester prenatal care utilization through collaborative efforts with healthcare providers, community organizations, and outreach initiatives.

Indicators:

- Adults who have had a routine checkup
- Adults without health insurance

- Adults 65+ without health insurance
- Children without health insurance: Under 19
- Percent of Women Receiving Prenatal Care in the First Trimester

3. Economic Stability

Goal: By 2029, reduce financial barriers to health by decreasing the percentage of adults unable to afford medical care and improving access to food and transportation resources through strategic partnerships, community investment, and funding support for social service programs.

Indicators:

- Food insecure children likely ineligible for assistance
- Adults unable to afford to see a doctor
- Workers Commuting by Public Transportation

4. Health Risk Behaviors and Early Detection

Goal: By 2029, improve prevention and early detection outcomes by increasing cancer screening utilization, strengthening chronic disease management, and reducing rates of preventable infectious diseases through community education, clinical partnerships, and sustained investment in preventive health initiatives.

Indicators:

- Melanoma incidence rate
- Mammogram in the past 2 years: 50-74
- Prostate Cancer Incidence Rate
- Syphilis Incidence rate
- Adults who Have Taken Medications for High Blood Pressure

HEALTH EQUITY ORGANIZATIONAL CAPACITY ASSESSMENT AND PLAN

HEALTH EQUITY

From October 2025 through January 2026, NNPH conducted a Health Equity Organizational Capacity Assessment using the Bay Area Regional Health Inequities Initiative (BARHII) Organizational Self-Assessment Toolkit. The assessment was designed to evaluate the organization's capacity to advance health equity by examining organizational practices, workforce competencies, leadership, community engagement, data use, and systems that support equitable public health practice.

The BARHII Organizational Self-Assessment Toolkit is a nationally recognized framework used by local health departments to assess organizational readiness, identify strengths and opportunities for growth, and guide strategic investments in health equity. The assessment supports continuous quality improvement by establishing a baseline for organizational capacity and informing priorities that strengthen the integration of health equity into public health practice.

To ensure broad participation while minimizing survey fatigue, NNPH adapted the BARHII assessment tools to fit the organization's needs. Information was collected from employees, leadership, and external partners through surveys, interviews, and focus groups. Although several assessment domains were abbreviated or deferred, the

process provided valuable insight into organizational strengths and opportunities for improvement.

The assessment examined key organizational domains that contribute to advancing health equity, including:

- Leadership commitment and organizational culture
- Workforce development and hiring practices
- Community engagement and partnership
- Data, evaluation, and community-informed decision-making
- Communication and transparency
- Knowledge of the social, environmental, and structural drivers of health
- Collaboration, community leadership, and cultural responsiveness

Findings from the assessment informed the development of NNPH's Health Equity Organizational Capacity Plan and were incorporated into this Strategic Plan. Priority recommendations focused on strengthening organizational capacity in four key areas:

1. Data-Informed Decision-Making: Expand the availability, accessibility, and use of community health data to support decision-making, performance measurement, and community action.
2. Addressing the Factors that Influence Health: Strengthen cross-sector collaboration and adopt whole-person approaches that address social, environmental, and structural factors affecting health.
3. Workforce Recruitment and Development: Enhance recruitment, hiring, and professional development practices to build a skilled and diverse workforce equipped to advance health equity.
4. Organizational Learning and Continuous Improvement: Increase opportunities for staff training, technical assistance, and organizational learning to embed health equity throughout programs, policies, and decision-making.

The resulting Health Equity Organizational Capacity Plan serves as a companion to this Strategic Plan and provides a roadmap for strengthening NNPH's ability to advance health equity over the next three years. Progress will be monitored through the organization's performance management and quality improvement processes, ensuring that health equity remains integrated into planning, decision-making, and service delivery across the agency.

NATIONAL TRENDS

1. Strengthening Public Health Infrastructure

Public health has undergone significant transformation in recent years. While local health departments have traditionally focused on delivering programs and services, there is now a national emphasis on strengthening the public health system itself. Organizations across the country are investing in foundational capabilities such as sustainable funding, workforce development, modern data systems, communications, emergency preparedness, performance management, and policy capacity. These

investments help ensure health departments can consistently deliver the Foundational Public Health Services and remain responsive to both emerging threats and the everyday health needs of their communities.

2. Building and Supporting the Public Health Workforce

A strong public health system depends on a skilled and supported workforce. Nationally, workforce development has become a priority through initiatives such as the Public Health Accreditation Board's (PHAB) “Staffing Up” initiative, which focuses on building the workforce necessary to deliver essential public health services. Beyond recruitment, health departments are investing in employee retention, leadership development, succession planning, workforce well-being, and expanding competencies in areas such as data analytics, communications, quality improvement, policy, and community engagement.

NNPH recognizes that investing in its workforce is essential to providing high-quality public health services. By fostering a culture of learning, innovation, and professional development, the agency is building the capacity needed to meet the evolving needs of the community.

3. Advancing Organizational Excellence Through Accreditation

Public health accreditation has evolved from a one-time achievement to a framework for continuous organizational improvement. Today, accredited health departments use strategic planning, performance management, quality improvement, and data-informed decision-making to evaluate their effectiveness, strengthen operations, and demonstrate measurable impact. Accreditation provides a foundation for accountability, organizational learning, and continuous improvement.

NNPH remains committed to using accreditation principles to improve organizational performance, strengthen decision-making, and ensure resources are aligned with community priorities. This strategic plan serves as a roadmap for achieving measurable results while maintaining a culture of excellence.

4. Embedding Health Equity Throughout the Organization

Health equity continues to be a national public health priority, but the focus has shifted from implementing standalone initiatives to integrating equity throughout an organization's policies, programs, and operations. Leading health departments are embedding health equity into strategic planning, workforce development, budgeting, performance management, policy development, quality improvement, and community engagement. Organizational assessment tools, such as the BARHII Organizational Self-Assessment Toolkit, help agencies evaluate their capacity and identify opportunities to strengthen equitable public health practice.

The organization is committed to ensuring health equity is incorporated into decision-making and service delivery. By building internal capacity and strengthening partnerships, the agency aims to reduce barriers to health and improve opportunities for all residents to achieve their highest level of health.

5. Modernizing Public Health Through Data

Reliable data are essential for understanding community health needs, measuring progress, and informing effective decision-making. Nationally, health departments are modernizing their data systems by expanding data sharing, developing public dashboards, integrating multiple data sources, and improving access to timely, meaningful information. The emphasis has shifted from simply collecting data to making it actionable for public health professionals, community partners, policymakers, and residents.

NNPH is committed to advancing data-informed decision-making by increasing access to community health information, strengthening data systems, and expanding the use of the Community Health Assessment as a shared resource. By aligning community partners around common indicators and transparent reporting, the agency seeks to support coordinated action and improve health outcomes across Northern Nevada.

COMMUNITY INDICATORS

The organization selected the community indicators listed to inform the Strategic Plan priorities and goals as well as to inform the next step of drafting annual outcomes and initiatives, and to track population health outcomes in Washoe County.

Strategic Priority One, Healthy Lives – Improve the health of our community by empowering individuals to live healthier lives.

Community Indicators
% of infants breastfed at 1 year
% of overweight adolescents
% of obese adolescents
% of overweight adults
% of obese adults
% of adults who are current smokers
% of youth who currently smoke cigarettes
Reported cases of HIV per 100,000
Teen ages 15-19 years old birth rates per 100,000
Child immunization rates (children 19-35 months receiving childhood vaccination series)
% of children without health insurance: Under 19

% of adults ages 18-64 with health insurance

% of adults who last visited a doctor for a routine checkup within the past year

% middle school students who used electronic vapor products during the 30 days before the survey

Workers Commuting by Public Transportation

Syphilis Incidence rate

Adults who Have Taken Medications for High Blood Pressure

Mammogram in the past 2 years: 50-74

Prostate Cancer Incidence Rate

% of high school students used electronic vapor products during the 30 days before the survey

% of Women Receiving Prenatal Care in the First Trimester

Strategic Priority Two, Healthy Environment – Create a healthier environment that allows people to safely enjoy everything Washoe County has to offer.

Community Indicators

NAAQS for Ozone

NAAQS for PM2.5

Washoe County total municipal solid waste

Washoe County recycling rates

Strategic Priority Three, Local Culture of Health – Lead a transformation in our community's awareness, understanding and appreciation of health resulting in direct action. (No community indicators)

Strategic Priority Four, Impactful Partnerships – Extend our impact by leveraging partnerships to make meaningful progress on health issues.

Community Indicators

Percentage of population defined as food insecure

Middle School Students Who Reported Never/Rarely Getting Help When They Felt Sad, Empty, Hopeless, Angry, or Anxious

% of high school students who attempt suicide

% of high school students who ever took a prescription pain medicine without a doctor's prescription or differently than prescribed

% of high school students who currently drink alcohol (past 30 days)

Prevalence of diabetes

Coronary heart disease mortality rate per 100,000

Medical emergency 911 calls received per 100,000 population

Opioid-related deaths in Washoe County per 100,000 population

Intentional injury (suicide) mortality rate per 100,000 population

Strategic Priority Five, Organizational Capacity – Strengthen our workforce and increase operational capacity to support a growing population.

Community Indicators

Washoe County population

Washoe County annual % population growth

Staff per 100,000 population

% of population who speak only English

Strategic Priority Six, Organizational Effectivenss: Advance organizational excellence through continuous improvement, innovation, and data-informed practices that enhance the quality and efficiency of public health services. (No community indicators)

Strategic Priority Seven, Financial Stability – Enable the Health District to make long-term commitments in areas that will positively impact the community's health by growing reliable sources of income.

Community Indicators

% State funding support

Budget per capita

PERFORMANCE MANAGEMENT OF STRATEGIC PLAN

The Strategic Plan is implemented through an annual action plan that identify specific objectives, targets and initiatives, aligned with each Strategic Priority, District Goal, and Division Goal. The action plan translates the Strategic Plan into measurable work and establishes accountability for achieving organizational priorities.

Performance is monitored using an online performance management system that tracks key performance measures. Progress is reviewed quarterly with leadership and staff to evaluate performance, identify opportunities for improvement, and make adjustments as needed. Regular updates are also shared with the District Board of Health to support effective governance and oversight. To promote transparency and accountability, NNPH publishes an annual Strategic Plan report summarizing progress, key accomplishments, and areas of continued focus for staff, the District Board of Health, community partners, and the public.

APPENDIX A – PLANNING PROCESS

Strategic Planning is a process for defining and determining an organization's roles, priorities, and direction over three to five years. A strategic plan sets forth what an organization plans to achieve, how it will achieve it, and how it will know if it has achieved it. The strategic plan provides a guide for making decisions on allocating resources and taking action to pursue strategies and priorities.

Pre-Planning **July 2025**

District Health Officer and Division Directors will have a high-level understanding of the project work plan and deadlines and have a general understanding of the opportunities for participation and workload for their teams. The planning framework will be finalized based on input collected from the teams.

Meetings:

July 23 – All Leadership Meeting Orientation
September 24 – Strategic Plan Kick-off at All Leadership Meeting

Plan Inputs **August – Jan 2026**

Planning will be informed by an updated Community Health Assessment, Community Health Improvement Planning Process, Health Equity Capacity Assessment and Plan, and as well as national trends specific to the foundational public health services. By both design and necessity, most of this work will happen concurrently with plan input completion deadlines scheduled in time to inform key planning decision points.

Retreat **Februray 2026**

District Board of Health and Health District Leadership will convene in a workshop setting to review recommended mission, vision, values, key priorities, and goals. The board will hear presentations regarding plan inputs as well as hear from cross-divisional staff committees regarding plan recommendations.

Meetings:

Februray 26- Strategic Plan Retreat

Planning **March - May 2026**

Facilitated strategic planning workshops with program staff will be implemented to develop key performance measures and objectives aligned with the District Board of Health's strategic priorities. These collaborative workshops are designed to align program activities with organizational goals, identify opportunities to maximize impact, and establish meaningful measures that demonstrate progress toward improving community health. The process ensures that program priorities reflect both organizational direction and the evolving needs of the communities we serve.

Meetings:

Three workshops with each program.

Final Draft and Approval **July 2026**

The plan draft will be presented and finalized based on results of the planning retreat.

Meetings:

July 23 - Plan Approval at regular District Board of Health meeting

Participant Lists

District Board of Health

1. Clara Andriola, Washoe County Commissioner
2. Paul Anderson, Sparks City Council
3. Devon Reese, Reno City Council
4. Dr. Ituarte, Non-Elected Washoe County Appointee
5. Michael D. Brown, Non-Elected Washoe County Appointee
6. Dr. Reka Danko, Non-Elected Washoe County Appointee
7. Steve Driscoll, Non-Elected Washoe County Appointee

NNPH Division Directors

1. Chad Kingsley, DHO
2. Francisco Vega, AQM
3. Christina Sheppard, CCHS
4. Nancy Diao, EPHP
5. Rob Fyda, EHS

Core Planning Team

1. Chad Kingsley, District Health Officer
2. Rayona LaVoie, Director of Programs and Projects
3. Jack Zenteno, AHS
4. Erin Dixon, Deputy District Health Officer
5. Erica Olsen, Principal with OnStrategy
6. Kim Perkins, Consultant with OnStrategy

Revision Log	
Date of Revision	**Reason for Revision**

NORTHERN NEVADA
Public Health
Serving Reno, Sparks & Washoe County

Please contact Julia Ratti for
questions or comments at
juratti@nnph.org