



WE ARE HEALTH CENTERED

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Letter from the District Health Officer

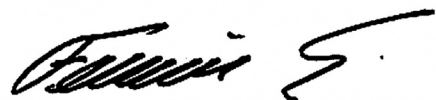
Dear Colleagues:

I am pleased to share the Southern Nevada Health District's Strategic Plan for 2024-2027. The past few years have been a challenging and tumultuous time for our community and agency. The purpose of this three-year plan is to provide guidance and operational support as we continue to transition our COVID-19 response actions into our routine public health activities, and while providing the same high level of essential services and programming to our diverse and dynamic community.

This strategic plan embodies priorities that position our staff and organization to respond to our evolving environment, emerging issues, and new opportunities more effectively through augmented training opportunities and resources. There is an overarching focus on enhancing both internal and external communication processes as a recognition of the importance of the flow of information to achieving our goals and the ultimate success of the plan.

As one of the largest local public health organizations in the United States, the Health District serves more than 2.3 million residents and more than 36 million visitors to Southern Nevada each year. We are an integral part of a unique community, and with the input of many of you, Board of Health members and key stakeholders, we have enhanced our Mission and Vision statements, as well as developed Values that are in alignment with the core principles and attributes we aspire to embody when representing an organization dedicated to protecting and promoting the health of the community we serve.

I look forward to working with each of you as we continue to assess and improve our services to improve the health and well-being of Southern Nevada residents and visitors.

A handwritten signature in black ink, appearing to read "Fermin S.", written in a cursive style.

Fermin Leguen M.D., MPH
District Health Officer

Executive Summary

The Southern Nevada Health District (SNHD) contracted with Huron Consulting Group for services delivered between March and October of 2023 to **facilitate the planning process ensuring meaningful and strategic goal definitions for 2024**. Huron Consulting was formed in 2002, has over 1,000 employees, and counts strategic transformation and healthcare as two of its specialties. Huron's first steps included agreement on the scope of their work and obtaining alignment with SNHD leadership and members of the Board of Health.

The Huron team compiled details from more than 15 SNHD leaders and surveyed community partners for analysis of the competitive landscape, opportunities, and threats to the agency. Huron consultants met virtually, on three occasions, with District leadership to review expectations and review results from community surveys. The data provided perspective on strengths and expectations of community partners.

This evidence drove the facilitated discussion of the District Mission, Vision, and Values amongst stakeholders across the agency including managers of programs. Two working groups of District Leaders were formed to design and deliver proposals for revisions to the Mission, Vision, and Values that had been in place since 2016. The revised Mission and Vision were approved by SNHD leadership in October 2023. The values workgroup presented their proposed options and went back for an additional revision. The final proposal of values, represented by the CARES acronym, was approved later that same month.

Division and program leaders dedicated two half-day sessions held in October and November 2023 to discuss goals for programs, divisions, and the District as a whole. These goals were finalized in late December of the same year. These are the goals presented in this plan that will drive measured work across the District in 2024.

SNHD will institute a dashboard system, for the first time, to track progress of all 32 strategic goals. Each goal will be entered into the system with timelines and measured activities. SNHD leaders can view progress and direct questions to the right collaborators instantly. The dashboard system contains features to remind responsible parties to update their goals each quarter, or more often, automatically with a built-in escalation feature if they do not respond. Entering goal progress each quarter is low impact by design. Contributors can access the dashboard on their phone or computer and update the goals that they committed to in less than two minutes each. This combination of progress and accountability is an upgrade to the way that organizational performance is managed at SNHD. The ability to manage through tools like this dashboard is part of the new Performance Management/Quality Improvement Plan. The scope of this plan is dictated by PHAB (Public Health Accreditation Board) and will fulfill one of the requirements for SNHD reaccreditation in 2027.

COMPONENTS OF THIS PLAN INCLUDE:

- *Updated mission, vision and values*
- *Goals and objectives for 2024*
- *How the plan will be operationalized and monitored*
- *Appendices and references*

Our Mission



*To assess, protect
and promote the health,
environment and well-being
of Southern Nevada
communities and visitors*



Our Vision



Healthy people thriving in a healthy Southern Nevada



Our Values



C·A·R·E·S

C.A.R.E.S. are the guiding principles of how we act in performing our work and interacting with others that help us achieve our **MISSION** of assessing, protecting, and promoting the health, environment and well-being of Southern Nevada communities and visitors. Our unwavering commitment to C.A.R.E.S. supports our **VISION** of Healthy People Thriving in a Healthy Southern Nevada.

COMMITMENT



We are committed to providing quality service and collaborating with internal and external partners to **achieve mutual goals** and strengthen our community's health.

We carry out our responsibilities and report in a **transparent manner**. We strive to employ our capacities in a creative and agile way, embracing good leadership and stewardship principles to achieve long-term sustainability.



ACCOUNTABILITY

RESPECT



We recognize and appreciate the **dignity and worth of every person**, regardless of their background, traditions, talents, or skills. We build positive relationships that foster inclusion and belonging for all, ensuring access to services based on needs.

We pursue **quality and innovation** in everything we do, from our policies and systems to our services and interactions. We embrace the pursuit of excellence and a culture of improvement in our interactions with patients, partners, colleagues, and other stakeholders.



EXCELLENCE

SERVICE



We strive to provide an **exceptional experience** for everyone through accessible, compassionate services to our patients, clients, co-workers, and communities.

Summary of SWOT and Environmental Scan Results

The Southern Nevada Health District (SNHD) has a duty to the community to periodically ask for formal feedback on the services that are being delivered and gaps around those that could be delivered in the future.

SNHD contracted with Huron Consulting to organize the incoming information as well as facilitate surveys and conversations with community partners to gain the most useful information that can drive action by SNHD Administration. Both internal and external collaborators provided feedback on the SWOT (strengths, weaknesses, opportunities, threats) analysis and focused questions to define the competitive environment faced by the District.

The agency sought perspectives of collaborating partners, agencies and the public to collect their views on strategies, priorities, and competition to ensure that new strategies and objectives in this plan are as aligned with our community as possible. Leadership from every Division within SNHD and major programs also contributed their views on current and future needs in this stage of the process. The community survey was promoted on social media and the SNHD website generating 113 responses to the 16 questions survey. Feedback was received from these service-consumer groups in descending order of group-size: Immunizations (including COVID vaccinations), Vital Records, Other Services, Passport, Permits, Community Health Center and more.

Some feedback from the community included competitive advantage in the areas of funding, leadership, quality of staff, deep level of services, and being business friendly in regulation. Community surveys listed potential threats to the agency as staff turnover (loss of institutional knowledge), lack of resources, lack of marketing presence, and the ability to accept data from community partners and make it widely available. Opportunities noted by this group include working with multiple community partners, together, on single initiatives, continuity of goals, and connection to the unhoused population. One top service to offer in the future was programming for the elderly (group classes on diet and exercise, counseling/mental health for

homebound seniors). Behavioral health options also surfaced as a valuable opportunity for the community.

SNHD staff offered the following items as the most critical areas where the District excelled: culture, adaptability, diversity, service delivery, IT modernization, community and partner engagement. Staff offered these opportunities in their feedback: internal communications (+ across programs and divisions), working strategically, employee engagement, leadership skills, individual performance management, and succession planning.

ADVANTAGES:

funding; leadership; quality of staff; deep level of services; being business friendly in regulation; culture; adaptability; diversity; service delivery; IT modernization; community and partner engagement

OPPORTUNITIES:

working with multiple community partners; continuity of goals; connection to the unhoused population; programming for the elderly; behavioral health; internal communications; working strategically; employee engagement; leadership skills; individual performance management; succession planning

THREATS:

staff turnover (loss of institutional knowledge); lack of resources; lack of marketing presence; ability to accept data from community partners and make it widely available

Strategic Priorities

There are **four areas of equal importance and focus** at the District Level:



- **PERFORMANCE MANAGEMENT AND QUALITY IMPROVEMENT**
- **WORKFORCE DEVELOPMENT AND ENGAGEMENT**
- **LEADERSHIP DEVELOPMENT AND TRAINING**
- **FINANCIAL SELF-SUFFICIENCY**

Strategic Priorities



THE PRIORITY AREA OF PERFORMANCE MANAGEMENT AND QUALITY IMPROVEMENT

is the mark of an effective health department. The term “evidence-based” is used 23 times across five of the ten domains of the PHAB reaccreditation standards and measures. The term is used in reference to interventions, programs, messaging, and practices. **Applying rigor consistently to decisions made across SNHD will bring more consistency and lend itself to higher quality experience by external and internal stakeholders.** The clinics are more versed in measuring quality because of the compliance-driven reporting, already in place, in that area. There is great value in this operating method that will help the rest of the programs at SNHD deliver high levels of value and impact in the community. The District-wide Dashboard system, coming online in the spring of 2024, will give better visibility to progress on goals and workplans while enabling data-driven decisions to be made in real-time.



THE WORKFORCE DEVELOPMENT AND ENGAGEMENT PRIORITY

stems from the annual engagement survey. February of 2024 will mark the second of five grant-funded employee surveys delivering measures of motivation, execution, ability to change, teamwork, trust, retention, productivity, customer focus, and future success. This is a third-party managed tool to maintain anonymity and grow trust. **SNHD leadership is making strides to improve the experience of one of the greatest assets: STAFF.** New programs and communication about little-known existing ones have been publicized since the results of the first OVS (Organizational Vital Signs) survey results were posted.



INCREASING LEADERSHIP DEVELOPMENT AND TRAINING OPPORTUNITIES

for managers, supervisors and potential leaders is a crucial part of supporting the workforce. The annual Organizational Vital Signs (OVS) survey will not improve the employee experience on its own. **Improving metrics will come from evidence-based interventions to empower staff to give their best when working with patients, partners, colleagues, and other stakeholders.** Leaders at every level can influence this behavior when they have the tools and direction. The HR team has committed to making measured improvements in the onboarding process for our new staff members. Getting a great start with support can help new staff be productive faster and also contribute to longer tenure when they feel like a part of the organization and valued.



THE PRIORITY OF INCREASING FINANCIAL SELF-SUFFICIENCY

is recognized by internal stakeholders and the community (based on their surveyed responses contributing to this plan). This demonstrates staff and community partner awareness of limitations to the work done based on grant funding. This can lead to fluctuations in staffing and, sometimes, changes to the level of service provided in our community. **Seeking ways to increase the balance of steady funding over time can increase consistency and allow true growth in programs that the community needs and utilizes the most.**

Goals and Objectives

There are five areas of measurable improvement at the Division Level:



- **ORGANIZATIONAL DEVELOPMENT AND SUSTAINABILITY**
- **INCREASED FINANCIAL SELF-SUFFICIENCY**
- **HEALTH PROGRAM ENHANCEMENT**
- **COLLABORATIONS AND PARTNERSHIPS**
- **ADMINISTRATIVE IMPROVEMENTS**

Goals and Objectives

Objective 1: Organizational Development and Sustainability



SNHD will increase the use of performance data, such as quality measurement and processes, to increase the number of quality improvement projects and documented improvements from a monthly baseline by 25% on December 31, 2024, as measured by Divisional quality reports established March 1, 2024.

PRIMARY AND PREVENTATIVE CARE (PPC) will increase by 10% of baseline the number of quality improvement projects across the division by December 31, 2024, as measured by Annual Quality Assurance PPC Divisional Report.

DISEASE SURVEILLANCE AND CONTROL (DSC) will increase use of performance data, such as quality measurements and improvement processes, to support managers and staff for data-driven decisions by 50% from baseline by end of calendar year 2024 as measured by DSC Public Health Emergency Preparedness (PHEP) indicators and Disease Investigation and Intervention Specialist (DIIS) investigation indicators.

COMMUNITY HEALTH (CH) will strengthen the quality improvement program by developing a new CH Division-wide quality improvement plan by September 30, 2024.

THE HR SECTION OF THE ADMINISTRATION DIVISION will increase satisfaction with the onboarding process from 66% to 79% in comparison of HR surveys 2023 vs 2024 and OVS 2023 vs 2024 no later than 3/31/24.

Goals and Objectives

Objective 1: Organizational Development and Sustainability



*SNHD will increase the overall **Organizational Vital Signs (OVS) survey score across all metrics** from an average score of 921.9 to an average score of 925.9 as measured by the OVS survey in 2025.*

DSC will increase average OVS score from 104 to 108 by 12/31/2024 with a focus on trust, change, retention, and customer focus.

PPC will increase average OVS score from 104 to 108 by 12/31/2024 with a focus on trust, change, retention, and customer focus.

PPC will increase “Trust” as reported in the OVS, from a score of 101.3 to 103 or above by 3/31/2024.

PPC will increase by 10% the number of opportunities for PPC divisional staff professional development opportunities by December 31, 2024, as measured by monthly reports of the number of opportunities provided.

THE ADMINISTRATION DIVISION will increase OVS participation by 16% compared to the 2/23 OVS Survey to the 3/24 OVS survey (from 34% to 50%).

ENVIRONMENTAL HEALTH (EH) will increase average OVS score from 101.1 to 103 by 12/31/2024 with a focus on trust, change, future success, and customer focus by December 31, 2024.

SNHD will increase staff development opportunities for managers, supervisors, leads and potential leaders from five (5) to ten (10) courses by the end of CY2025 as measured by courses offered.

THE HR SECTION OF THE ADMINISTRATION DIVISION will increase awareness of existing training programs from 0 to 50% unique FTE base clicks by promoting training on the District-wide intranet by the end of calendar year 2024.

Goals and Objectives

Objective 2: Increased Financial Self-Sufficiency



*SNHD and the Administration Division will **increase transparency in General Fund budgeting** from projection-based budget development to specific justification-driven based budgeting measured by a detailed zero-based FY2025 budget.*

CH will **identify additional sustainable funding or increase the number of existing secure funding sources** from zero to one for each program by end of fiscal year in 2024.

THE SOUTHERN NEVADA COMMUNITY HEALTH CENTER (SNCHC) will **increase the number of Medicaid visits provided** from 5,443 (FY23) to 5,876 by December 31, 2024, as measured by SNCHC's Pay Mix report.

THE FACILITIES SECTION OF THE ADMINISTRATION DIVISION will **decrease energy consumption by 5%** by the end of calendar year 2024.

Objective 3: Health Program Enhancement



DSC will **increase timelines of foodborne illness complaint response of Disease Surveillance and Control by 10%** as measured by average time from FBI complaint to initiation of investigation for complaints that meet the threshold for investigation by end of calendar year 2024.

SNCHC will **increase the number of unique patients served annually** from 6,343 to 9,980 by December 31, 2024, as measured by the Health Resources & Services Administration (HRSA) Uniform Data System (UDS) report.

SNCHC will also **increase the percentage of patients screened for depression and if positive, with a documented follow-up plan** from 55.8% (CY22) to 67% by December 31, 2024, as measured by the HRSA UDS report.

Goals and Objectives

Objective 4: Collaborations and Partnerships



ENVIRONMENTAL HEALTH (EH) will increase planning meetings with jurisdictional partners to mitigate potential arboviral transmission from 0 to 4 by December 31, 2024.

EH will increase educational or informational outreach events about sidewalk vending in the community by 50% by December 31, 2024.

EH will increase by 50% the number of comprehensive reviews of existing environmental health regulations by December 31, 2024.

DSC will increase community involvement and organizations connected (from 10 to 12) to SNHD's Community Health Improvement Plan (CHIP) priorities by the end of FY2024.

PPC will increase by 10% of baseline the number of community partners and participation in community partner events by December 31, 2024, as measured by monthly tracking reports.

CH will increase by 10% of baseline the number of community partners and participation in community partner events by December 31, 2024, as measured by monthly tracking reports.

THE OFFICE OF COMMUNICATIONS SECTION OF THE ADMINISTRATION DIVISION will increase the distribution and posting of timely public health information from 57 news releases and four quarterly external newsletters to 72 news releases and eight external newsletters during CY2024 to ensure understandable and accessible information is available to diverse audiences and communities.

Goals and Objectives

Objective 5: Administrative Improvements



THE FINANCE SECTION OF THE ADMINISTRATION DIVISION will be responsible for **increasing participation in pre-application grant review of departments that increase FTE or other significant resources** prior to submission of grants from 2 to 4 departments by the end of calendar year 2024.

THE LABOR RELATIONS SECTION OF THE ADMINISTRATION DIVISION will, in comparison of HR surveys 2023 vs 2024 and OVS 2023 to 2024, **increase satisfaction with the work of Labor Relations team** from 53% satisfied to 78% by 3/31/24.

THE IT SECTION OF THE ADMINISTRATION DIVISION will **increase the leadership metric for the business objective of Empowering Users** from the current 79% to 85% by 12/31/2024 as measured by the annual CIO Business Vision diagnostic.

CH will **improve internal communication between executive team and middle management** through increased frequency of CH Division leadership meetings from 12 to 24 by September 2024.

Putting the Plan into Action

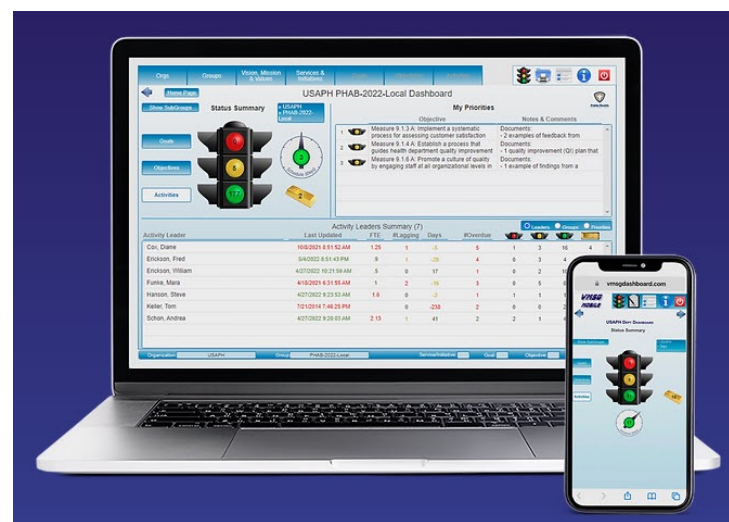
SNHD has adopted the VMSG (Vision, Mission, Services, Goals) Dashboard system to manage performance of the strategic goals in this document in addition to other ongoing and future projects like PHAB reaccreditation and quality improvement. This tool is only available to public health agencies and is used by dozens of health departments of all sizes across the US.

One of the key values of the VMSG Dashboard is the ability to break complex plans down to simple steps (Objectives with related Activities) then promote and track the requirements for completion using the Real-Time Planning features (automated email notifications and Quick-Update tools). The Objectives and Activities are assigned to the specific staff members responsible for completion of the Activities and monitoring the status of the Objectives. Using this methodology, the plans can be executed and monitored requiring only a few minutes of each person's schedule each month. Each manager's personal dashboard allows them to monitor and audit the work of their team at a glance, easily and accurately.

The tool is designed to easily enter strategies, goals and progress updates for accountability and awareness at all levels. This will gather performance measures from across SNHD into one portable format for the first time. Leaders can view a dashboard page of only what's important to them or drill down into details to compare performance of one group to others. Entering progress on established goals takes less than two minutes on average and can be done from a mobile phone. **The SNHD dashboard will be an integral part of the combined Performance Management/Quality Improvement plan. The plan will drive the efforts of executing goals and improving performance with expectations and authority.**

The SNHD Performance Management (QI) plan is currently under revision to reflect the importance of measuring and acting upon real-time performance of goals. The final plan will contain workflows that begin with reporting on goal progress starting at the program level to their leaders. Leaders that receive reports review progress and provide commentary. The cycle continues up through departments and divisions terminating with the District Health Officer providing comments to the Board of Health based on measured performance of the District reflected by this dashboard.

This plan will be subject to an annual review, at a minimum, based on performance and emerging PESTLE (Political, Economic, Social, Technological, Legal and Ecological) factors. The ability to pivot goals before the next formal plan to keep service and relationships growing is a critical component of strategic planning. The framework of this plan will enable SNHD to continue its positive impact in the community.



Appendices

Acknowledgements

The District Health Officer thanks all those who contributed during various stages in the creation of the District Strategic Plan 2024.

Board of Health

Marilyn Kirkpatrick
Chair; Commissioner, Clark County

Scott Nielson
Vice-Chair; Member-at-Large

Frank Nemec MD
Secretary; Member-at-Large

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Appendices

Process Summary

The contract for strategic plan support services with Huron Consulting went into effect in March of 2023. That kicked off bi-weekly touchpoint calls of 30-45 minutes between SNHD leaders and Huron representatives to assess timelines deliverables and work-quality. The DHO received monthly summaries from Huron beginning in April 2023. Huron took delivery of over 30 documents and links including SNHD assessments and research on the services provided like the Community Health Assessment and corresponding Community Health Improvement Plan, past strategic plans and references, Forces of Change Assessments, and others.

Three virtual meetings took place from March to May of 2023 to kick off the project, assign responsibilities and expectations and raise awareness of SNHD leadership regarding their input into this plan. Three Board of Health Members were invited to one of these meetings to review the process and show support. A cross-section of staff across SNHD was polled regarding effectiveness and potential upgrades for the (then-current) mission, vision, and values. The Board of Health was asked for feedback on a summary of these surveys in June 2023. Over 20 community partners were interviewed from June to July 2023 to define the different groups of people, communities, or key stakeholders the organization aims to serve, their similarities and differences, and how SNHD organization reaches them.

Internal stakeholders provided their input for a competitive analysis applied to SNHD. Another component of strategic dialogs, facilitated by Huron, included an open survey for the community. The opportunity to participate

was promoted by internal social media sites as well as being posted on the SNHD website to encourage input from the community. Input for the SWOT analysis and PESTLE environmental scan was provided by over 12 internal leaders and spanned each of the 6 divisions in August 2023.

A principal consultant from Huron conducted a half-day session, in person, with SNHD leaders and two Board of Health members to discuss Mission, Vision, Values, and Goals for the District. A second virtual session was facilitated by Huron for SNHD leadership as training for goal development. SNHD leaders met two more times to agree upon 28 goals from across each division. The Deputy District Health Officer, Administration composed four more goals as agency priorities to bring the total to 32 strategic goals. The goals were further refined and submitted as final products in December 2023. Between that time and the Board of Health meeting on January 25, 2024 SNHD leadership made several reviews and revisions for the product seen, here, today.

All strategic goals will be monitored in the VMSG Dashboard. Quarterly updates will be the most likely cadence for all 32 goals with understanding that reporting timelines can be set more frequently as needed. This will allow more visibility within SNHD leadership of our progress and inspire and adjustments to the Strategic Plan for 2025.