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Introduction
The Board of Health and staff of the Allegheny County Health Department (ACHD) developed this strategic plan with assistance from Evident Analytics. This plan provides ACHD with a multi-year framework for organizational development. The Health Director, board, and staff will review progress periodically and will review and update the plan annually as needed. This plan was developed through a six-month process, which included meetings with key leaders, data collection and analysis, and multiple strategic planning sessions with leadership and staff. The process was facilitated by consultants from Evident Analytics, who used a variety of techniques including parallel thinking, participatory appraisal, and collaborative visualization to move from the identification of needs to the formulation of solutions. The goals and action steps laid out in this document represent the consensus of stakeholders, board, and staff members regarding the challenges and opportunities that will likely impact ACHD over the next several years.

Vision
Healthy people in healthy communities.

Mission
The mission of the Allegheny County Health Department is to protect, promote, and preserve the health and well-being of all Allegheny County residents, particularly the most vulnerable.

Values
- Professional Integrity
- Respect
- Innovation and Critical Thinking
- Develop the Workforce
- Shared Leadership
- Community-centered
The Strategic Planning Process

Operational Plans and Strategic Plans

The work of the Allegheny County Health Department (ACHD) is guided by a number of plans and policies which help shape the day-to-day function of the department towards continuous improvement and responsiveness to emerging priorities for the health of the community.

The most foundational guidance for the activities of ACHD is the network of policies and procedures that make up the de facto organizational plan for the department. The purpose of the policies and procedures is to provide specific details regarding the expectations of function of each role within the department specifically and the function of the department within the community more generally. This de facto organizational plan includes internal guidance documents (like job descriptions and organizational charts) but also incorporates governmental policies (at the local, state, and federal levels).

In addition, like every local health department, ACHD is informed by the periodic Community Health Assessment (CHA). The CHA aggregates secondary data about the health of Allegheny County residents and the social determinants of health in the local communities, collects primary data about the health behaviors and perceptions of residents, and reports a basic analysis of this primary and secondary data to the stakeholders in the county. As a result of the most recent assessment process, five specific priority community health needs were identified: healthcare access, chronic disease and health risk behaviors, environment, maternal & child health, and mental health & substance abuse. In an effort to address the priority needs identified in the CHA, ACHD works together with other agencies to create and revise the Plan for a Healthier Allegheny (PHA) that guides the allocation of resources and services to address the key health issues in the county.

In addition to the operational plan and PHA, ACHD is also guided by a strategic plan, which is recalibrated every 3-5 years. The purpose of the strategic plan is to identify critical challenges to the department’s ability to fulfill its mandate in the coming years and then specifically outline high-value action steps that will build on the strengths of the department, mitigate the impact of any weaknesses, and capitalize on emerging opportunities. The strategic planning process also involves data collection and analysis, but the focus of the strategic plan is not to identify the priority needs in the health of the community, as much as to determine the priority needs of the organization in being able to respond effectively to those aforementioned community-level responsibilities.
Our Mandate – The Plan for a Healthier Allegheny

- Healthcare Access
- Chronic Disease Health Risk Behaviors
- Environment
- Maternal & Child Health
- Mental Health and Substance Abuse
Methodology

Secondary quantitative data analysis was conducted utilizing community health assessment data, epidemiological data, PHA data, and other sources at the outset of the assessment phase. These findings informed the qualitative data collection and served as the foundation for establishing potential priority areas for the strategic plan.

Following the secondary data review the qualitative data collection consisted of two arms: 1) Staff and Leadership of ACHD (including BOH members) and 2) External Stakeholders.

On four different occasions between June and October of 2018 (June 1<sup>st</sup>, June 22<sup>nd</sup>, August 31<sup>st</sup>, September 28<sup>th</sup>), staff members of ACHD participated in facilitated sessions to review the assessment data, identify priority strategic planning needs, create goals to meet the needs, and enumerate action steps that would be reasonably calculated to achieve those goals.

The meetings were organized around the five-phases of the CLEAR process.

**Center (Value Affirmation)**
Before beginning strategic planning, the process began by reconnecting stakeholders to the mission, vision, and values of ACHD. Visualizations of health equity were created during the initial meeting as participants collaboratively created models to articulate the connections between health equity and the vision and mission.

**Leverage (Asset Inventory)**
Drawing from approaches used in Asset-Based Community Development, the planning process started in earnest with an inventory of leverageable assets—specifically in the categories of Mastery (competency-based assets), Machinery (systems-level assets), and Momentum (antecedental assets). In multiple groups, teams evaluated the 3Ms and engaged in partnership analysis that would facilitate the work of the strategic plan.

**Evaluate (Needs Identification)**
Working in small groups to engage perspectives from as many team members as possible, retreat participants provided diverse perspectives on present and future needs, organized the feedback into actionable categories, and mapped out the weaknesses, deficits, and challenges related to the areas of focus.

**Aspire (Solution Creation)**
In our “solution-storming” session, the staff addressed high-priority needs with innovative approaches. These creative solutions became influential to the action-planning and to the formulation of a theory of action.
Resolve (Action Planning)
The crucial final phase of the process attempts to harmonize the aforementioned aspirations with the realities of organizational capacity, external pressures, acceptability with stakeholders, and manageable timeframes. Subsequently, these same groups outlined specific action steps and timetables.

During the same time period (June, 2018 through November, 2018) multiple external stakeholders were engaged through dozens of individual interviews and focus group sessions. In all, more than 50 individual external stakeholders participated in the process with representation including:

- Allegheny County Board of Health (BOH)
- Local government officials from Allegheny County
- Local government officials from the city of Pittsburgh,
- Representatives from Highmark Health
- Representatives from University of Pittsburgh Medical Center
- Representatives from the University of Pittsburgh School of Public Health
- Members of the Partnership for a Healthier Allegheny
- Local non-profit organizations and foundations
- Community members

Based on the findings that emerged from the data analysis, potential priority areas were discussed and reviewed by the ACHD Staff and Leadership. These potential priority areas combined with ACHD input were then submitted for further review and discussion to the BOH. The board used this information in an iterative process through small group phone conferences with external consultants and electronic surveys to rank and finalize the priority areas.

Once finalized, the ACHD Staff and Leadership drafted action steps to meet the goals identified in the priority areas and submitted the plan for approval to the BOH.
Strategic Priorities

As a result of the strategic planning process—specifically the strategic planning meetings—a total of five strategic priorities were identified. These five needs encompass a range of internal and external considerations deemed to be critical to the ACHD’s ability to fulfill its mission. The following statements define the multi-dimensional strategic priorities, which the strategic plan’s action steps are intended to address:

1. **INNOVATION**: The work of governmental public health is changing. More and more, innovation is needed in local health departments to fill these new roles. ACHD must create the environment and culture where innovation is valued and encouraged within a system of evaluation and implementation in order to address PHA and other emerging health issues and improve county residents experience.

2. **POLICY LEADERSHIP**: ACHD strives to be a leader in the promotion and enactment of policy that gives every resident of Allegheny County, especially the most vulnerable, access to healthy choices and healthy communities. To do that, we must collaborate with our public health partners across the Commonwealth to drive change in state legislation and regulation; we must work in partnership with the Board of Health to make best use of the Department’s unique rulemaking responsibility under the law in Allegheny County; and we must support and empower municipalities to enact healthy policy at the most local level.

3. **HEALTH EQUITY**: ACHD seeks to assure optimal health for all residents of Allegheny County, by working to remove obstacles to health such as poverty and discrimination, and increasing access to quality education and housing, safe environments, and health care.

4. **COMMUNITY ENGAGEMENT**: ACHD serves as the respected authority in Allegheny County for trustworthy information related to the health and well-being of our citizens. By delivering credible, consistent messaging to constituencies through relevant, target specific platforms we can engage the community as partners in health.

5. **WORKFORCE/INFRASTRUCTURE**: ACHD must optimize organizational functioning and improve the return on investment for public health services by strategically targeting the improvement of services: environmental health, clinical service delivery and data services, and by improving the recruitment and retention of talented professionals.
## Theory of Action

<table>
<thead>
<tr>
<th>If ACHD...</th>
<th>INNOVATION</th>
<th>POLICY LEADERSHIP</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>...creates an environment that encourages idea generation from all levels of the organization</td>
<td>...identifies key policy areas to complement the improvement targets in the PHA</td>
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<tr>
<td></td>
<td>...streamlines processes for evaluating potential solutions and implementing promising ideas</td>
<td>...improves its capacity to continuously assess the problem streams, policy streams, and political streams to identify emerging health policy windows in a timely fashion</td>
</tr>
<tr>
<td></td>
<td>...applies design thinking methodology to particular health priority areas</td>
<td>...creates a robust process for evaluating and reporting the effectiveness of policy development initiatives</td>
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<td></td>
<td></td>
<td>...integrates mechanisms into the community health assessment process to maintain timely tracking of outcome data, reporting to decision-makers about progress in key areas, and adjustment of health improvement priorities</td>
</tr>
<tr>
<td>Then...</td>
<td>...ACHD can augment evidence-based public health practices with local adaptation to improve contextual fit and novel solutions to address complex health problems</td>
<td>...Policy development can facilitate improvement in population health by driving impactful community health programming through the PIP-PEP cycle (Practice-Informed Policy, Policy-Enabled Practice)</td>
</tr>
<tr>
<td></td>
<td>...organizational effectiveness will be improved in ways that enhance all essential public health services</td>
<td>...ACHD can pursue a proactive and ambitious policy agenda that positions the health department as the chief health strategist for the region</td>
</tr>
<tr>
<td></td>
<td>...promising practices can be implemented without assuming inappropriate risk with governmental resources</td>
<td>...ACHD can create shared policy priorities for healthcare, academic, philanthropic, and advocacy organizations in Pittsburgh and Allegheny County</td>
</tr>
<tr>
<td>Then...</td>
<td>...targeted policy development and innovative public health work will help ACHD overcome the structural inertia that prevents most health departments from substantially improving relative performance on leading health indicators</td>
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### Theory of Action

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<tbody>
<tr>
<td>...designs programming aimed at reducing disease risks related to physical and social exposures during gestation, childhood, adolescence, adulthood, and older age.</td>
<td>...develops best practices for the use of social media based on message type and target audience.</td>
<td>...enhances environmental services through improvements in information technology, including asset acquisition and skill development to ensure timely permitting, enforcement and monitoring.</td>
<td></td>
</tr>
<tr>
<td>...develops and implements an organizational health equity plan that links initiatives to disaggregated health outcome data.</td>
<td>...utilizes channels already established by community partners to reach target audiences.</td>
<td>...identifies inefficient internal processes and improve workflow, particularly for processes that directly impact public services and health improvement goals.</td>
<td></td>
</tr>
<tr>
<td>...involves residents, especially the most vulnerable, in all decision-making and planning for community health improvement.</td>
<td>...streamlines intradepartmental communication between community partners and ACHD.</td>
<td>...expands recruitment efforts and develop the employee value proposition (EVP) for prospective and current employees.</td>
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<td>...the health improvement targets of the current PHA can be addressed through focused improvement of priority populations.</td>
<td>...broader perspectives will result in improved ability to identify high-value initiatives which combine low resistance, high feasibility, and meaningful expected impact.</td>
<td>...ACHD can strategically manage its resources and continuously improve the quality of services.</td>
<td></td>
</tr>
<tr>
<td>...staff members and community partners will begin to adopt shared conceptual understanding and shared metrics for improving health equity.</td>
<td>...stakeholders would have a clearer understanding of the role and capacities of the health department, as well as a deeper appreciation for the varied ways in which the department delivers essential services to create the conditions for health.</td>
<td>...decision-making processes will be improved through more comprehensive access to information/data.</td>
<td></td>
</tr>
<tr>
<td>...the upcoming CHA and CHIP process can incorporate a full spectrum of solutions to neighborhoods/townships/districts of concentrated, persistent health challenges.</td>
<td>...Improved relationships with advocacy organizations will reduce the friction-related inefficiencies that inhibit progress.</td>
<td>...recruitment and retention of employees will keep the organization stable through the transition with large numbers of retirements in the coming years.</td>
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<td>...ACHD will reduce health inequities—from determinants to outcomes.</td>
<td>...Allegheny County will become a more inclusive and healthy environment for cultivating social cohesion while becoming a more cosmopolitan urban area.</td>
<td>...ACHD will improve the return on investment in health improvement.</td>
<td></td>
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<tr>
<td>...ACHD will improve its relationship and reputation with the diverse groups throughout the county.</td>
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Strategic Plan

Innovation

The work of governmental public health is changing. More and more, innovation is needed in local health departments to fill these new roles. ACHD must create the environment and culture where innovation is valued and encouraged within a system of evaluation and implementation in order to
1) address PHA and other emerging health issues
2) improve county residents experience

GOAL 1: Create an environment and culture that encourages idea generation from all levels of the organization.
  I.1.1 Develop an incentive system to encourage staff idea generation and program development in alignment with PHA priorities by March 2020
  I.1.2 Design a leadership development process focused on skills for managing innovation and organizational improvement by January 2021
  I.1.3 Augment performance monitoring systems across departments to recognize innovative contributions by January 2021

GOAL 2: Enhance and optimize systems for identifying and testing innovations related to ACHD PHA priorities, emerging issues, and organizational functioning.
  I.2.1 Implement efficient internal processes for capturing ideas from staff related to the accomplishment of programmatic goals by June 2019
  I.2.2 Develop a pathway for novel suggestions from stakeholders (public and private) to be captured and considered by January 2020
  I.2.3 Adapt the quality improvement process to facilitate the rapid prototyping or implementation of innovations by March 2020
GOAL 3: Apply design thinking methodology to particular health priority areas in which fundamental, unsolved complex problems contribute to improvement stagnation or worsening health outcomes.

I.3.1 Consult and collaborate with external experts (including community partners) or convene expert panels, workgroups, or symposiums to garner information on evidence-based and promising practices related to specific health priority areas, particularly those identified in the PHA (e.g., drug overdose epidemic) or identified as an emerging issue. [Ongoing]

I.3.2 Utilize internal intersectional teams to generate recommendations for ACHD based on adaptations of evidence-based practices or novel approaches for unsolved problem. [Ongoing]

Policy Leadership

ACHD strives to be a leader in the promotion and enactment of policy that gives every resident of Allegheny County, especially the most vulnerable, access to healthy choices and healthy communities. To do that, we must collaborate with our public health partners across the Commonwealth to drive change in state legislation and regulation; we must work in partnership with the Board of Health to make best use of the Department’s unique rulemaking responsibility under the law in Allegheny County; and we must support and empower municipalities to enact healthy policy at the most local level.

GOAL 1: Identify key policy areas, to what level of government, prioritize to complement targets in PHA

PL.1.1 Engage BOH and key policy stakeholders (county executive, legislators, community groups, funders, citizens) in policy prioritization and evaluation. [Ongoing]

PL.1.2 Explore and develop sustainable mechanisms for communities most impacted to participate during the development and evaluation of policy by January 2021

PL.1.3 Develop food policy agenda designed to increase access to healthy food, reduce obesity, and promote food safety by January 2020

PL.1.4 Develop and implement a public health focused climate action plan for the Department by January 2020

PL.1.5 Develop tobacco policy agenda designed to reduce adolescent initiation and adult smoking by at least 10% by January 2020

PL.1.6 Update ACHD housing regulations with a specific emphasis on reducing health disparities and maintaining affordability by June 2020

PL.1.7 Implement revised version of ACHD Health in All Policies agenda and strategy to promote issues such as increased mobility and access to safe multi-model transit and changes to the built environment supporting physical activity by January 2021
PL.1.8 Identify specific opportunities for ACHD to play a role in policy that attacks poverty and reduces health disparities particularly relevant to PHA priorities [Ongoing]

GOAL 2: Improve capacity to continuously assess the problem, policy, and political streams to identify emerging health policy windows in a timely fashion.

PL.2.1 Equip and educate county council, ACHD staff, state legislatures, and the public about the public health policy making process in Allegheny County [ongoing]
PL.2.2 Increase capacity in public policy bureau to research/recognize windows of opportunity (including grant opportunities) [Ongoing]

GOAL 3: Create a robust process for evaluating the effectiveness of policy initiatives related to health improvements.

PL.3.1 Prioritize policies that would benefit from academic/scientific evaluation of impact on health outcomes and then join with academics to conduct evaluations, e.g. universal lead testing [ongoing]
PL.3.2 Use existing evidence both internally and externally to determine policy strategy for health improvement and then monitor health outcomes to better understand impact of policy change [ongoing]

GOAL 4: Integrate mechanisms into the community health assessment process to maintain timely tracking of outcome data, reporting to decision- makers about progress in key areas, and adjustment of health improvement priorities.

PL.4.1 Identify priority health outcomes and quantitative targets for health improvement through the ongoing community health assessment process. [Ongoing]
PL.4.2 Establish clear timelines and formats for routinely reporting progress on health priorities to members of the Board of Health and other stakeholders. [Ongoing]

Health Equity

ACHD seeks to assure optimal health for all residents of Allegheny County, by working to remove obstacles to health such as poverty and discrimination, and increasing access to quality education and housing, safe environments, and health care.

GOAL 1: Design programming aimed at reducing disease risks related to physical and social exposures during gestation, childhood, adolescence, adulthood, and older age.
HE.1.1 All ACHD programs will develop a written statement pertaining to how their programs address health equity by June 2020
HE.1.2 Pilot an integrated approach to public health in the Monongahela River Valley communities by establishing a district office focused on connecting residents to all ACHD programs and services by December 2019

GOAL 2: Develop and implement an organizational health equity plan that links initiatives to disaggregated health outcome data.
HE.2.1 Plan and conduct a health equity assessment by June 2019
HE.2.2 Begin implementing recommendations from the health equity assessment by March 2020

GOAL 3: Involve residents, especially the most vulnerable, in all decision-making and planning for community health improvement.
HE.3.1 Conduct assessments related health equity work in all PHA areas by June 2022 (and ongoing)
HE.3.2 Develop strategy to begin adding residents to the ACHD Advisory Coalition and PHA workgroups by December 2019

Community Engagement

ACHD serves as the respected authority in Allegheny County for trustworthy information related to the health and well-being of our citizens. By delivering credible, consistent messaging to constituencies through relevant, target specific platforms we can engage the community as partners in health.

GOAL 1: Develop best practices for the use of social media based on message type and target audience.
CE.1.1 Report the analytics of current social media/websites by July 2019
CE.1.2 Report best practices for public health communications – specifically social marketing segmentation by September 2019

GOAL 2: Utilize channels already established by community partners to reach target audiences.
CE.2.1 Research and identify best communication practices used by other health departments designed to promote health by July 2019
CE.2.2 Educate ACHD staff on all forms of community engagement by January 2020
CE.2.3 Survey our partners and the public about our community engagement practices by June 2020
CE.2.4 Develop a QI project that will compare current services with public health data and analyze for gaps in service by September 2020
2019 Strategic Plan

CE.2.5 Develop and implement a community engagement/social marketing plan by January 2021

GOAL 3: Streamline intradepartmental communication regarding community partners and ACHD.

CE.3.1 Identify current ACHD tools that could be shared (calendars, etc.) for community engagement by January 2020
CE.3.2 Develop a shared practices/tool(s) for intradepartmental communication about community engagement by September 2020
CE.3.3 Assess improvement efforts through surveys and focus groups by January 2022

GOAL 4: Develop an educational campaign designed to engage priority populations around topics related to PHA areas.

CE.4.1 Identify a set of key topics for targeted educational activities and priority populations by June 2020
CE.4.2 Construct educational materials and learning activities drawing from best practices in health education, popular education, and communications by January 2021
CE.4.3 Disseminate educational products to target populations identified in CE.4.1 by January 2022

Workforce/Infrastructure

ACHD must optimize organizational functioning and improve the return on investment for public health services by strategically targeting the improvement of services: environmental health, clinical service delivery and data services, and by improving the recruitment and retention of talented professionals.

GOAL 1: Enhance environmental services through improvements in information technology, including asset acquisition and skill development to ensure timely permitting, enforcement and monitoring.

WI.1.1 Evaluate the increased use of county supported IT solutions across environmental services programs by December 2019
WI.1.2 Implement a comprehensive air quality IT improvement program designed to reduce paperwork and increase the efficiency of the air quality team by June 2020
WI.1.3 Improve permitting process through automation and collection improvements by June 2021
WI.1.4 Evaluate complaint and response system for potential improvements for internal and external customers by January 2020
GOAL 2: Expand recruitment efforts and develop the employee value proposition (EVP) for both prospective and current employees.

WI.2.1 Conduct an employee engagement survey to determine perceptions of value across various facets of the EVP by June 2019

WI.2.2 Outline and implement a marketing/communications plan promoting the EVP to increase the prospective talent pipeline and to improve retention by September 2020.

WI.2.3 Develop formal strategy around flexible work schedules collaborating with other county departments by December 2019
Action Plan

2019

June
- I.2.1 Implement efficient internal processes for capturing ideas from staff related to the accomplishment of programmatic goals by June 2019
- HE.2.1 Plan and conduct a health equity assessment by June 2019
- WI.2.1 Conduct an employee engagement survey to determine perceptions of value across various facets of the EVP by June 2019

July
- CE.1.1 Report the analytics of current social media/websites by July 2019
- CE.2.1 Research and identify best communication practices used by other health departments designed to promote health by July 2019

September
- CE.1.2 Report best practices for public health communications – specifically social marketing segmentation by September 2019

December
- HE.1.2 Pilot an integrated approach to public health in the Monongahela River Valley communities by establishing a district office focused on connecting residents to all ACHD programs and services by December 2019
- HE.3.2 Develop strategy to begin adding residents to the ACHD Advisory Coalition and PHA workgroups by December 2019
- WI.1.1 Evaluate the increased use of county supported IT solutions across environmental services programs by December 2019
- WI.2.3 Develop formal strategy around flexible work schedules collaborating with other county departments by December 2019
2019 Strategic Plan

2020

January

- I.2.2 Develop a pathway for novel suggestions from stakeholders (public and private) to be captured and considered by January 2020
- PL.1.3 Develop food policy agenda designed to increase access to healthy food, reduce obesity, and promote food safety by January 2020
- PL.1.4 Develop and implement a public health focused climate action plan for the Department by January 2020
- PL.1.5 Develop tobacco policy agenda designed to reduce adolescent initiation and adult smoking by at least 10% by January 2020
- CE.2.2 Educate ACHD staff on all forms of community engagement by January 2020
- CE.3.1 Identify current ACHD tools that could be shared (calendars, etc.) for community engagement by January 2020
- WI.1.4 Evaluate complaint and response system for potential improvements for internal and external customers by January 2020

March

- I.2.3 Adapt the quality improvement process to facilitate the rapid prototyping or implementation of innovations by March 2020
- HE.2.2 Begin implementing recommendations from the health equity assessment by March 2020

June

- PL.1.6 Update ACHD housing regulations with a specific emphasis on reducing health disparities and maintaining affordability by June 2020
- HE.1.1 All ACHD programs will develop a written statement pertaining to how their programs address health equity by June 2020
- CE.2.3 Survey our partners and the public about our community engagement practices by June 2020
- CE.4.1 Identify a set of key topics for targeted educational activities and priority populations by June 2020
- WI.1.2 Implement a comprehensive air quality IT improvement program designed to reduce paperwork and increase the efficiency of the air quality team by June 2020
2019 Strategic Plan

2020, continued

September

- CE.2.4 Develop a QI project that will compare current services with public health data and analyze for gaps in service by September 2020
- CE.3.2 Develop a shared practices/tool(s) for intradepartmental communication about community engagement by September 2020
- WI.2.2 Outline and implement a marketing/communications plan promoting the EVP to increase the prospective talent pipeline and to improve retention by September 2020

2021

January

- I.1.2 Design a leadership development process focused on skills for managing innovation and organizational improvement by January 2021
- I.1.3 Augment performance monitoring systems across departments to recognize innovative contributions by January 2021
- PL.1.7 Implement revised version of ACHD Health in All Policies agenda and strategy to promote issues such as increased mobility and access to safe multi-model transit and changes to the built environment supporting physical activity by January 2021
- PL.1.2 Explore and develop sustainable mechanisms for communities most impacted to participate during the development and evaluation of policy by January 2021
- CE.2.5 Develop and implement a community engagement/social marketing plan by January 2021
- CE.4.2 Construct educational materials and learning activities drawing from best practices in health education, popular education, and communications by January 2021

June

- WI.1.3 Improve permitting process through automation and collection improvements by June 2021

2022

January

- CE.3.3 Assess improvement efforts through surveys and focus groups by January 2022
- CE.4.3 Disseminate educational products to target populations identified in CE.4.1 by January 2022

June

- HE.3.1 Conduct assessments related health equity work in all PHA areas by June 2022 (and ongoing)
Ongoing

- I.3.1 Consult and collaborate with external experts (including community partners) or convene expert panels, workgroups, or symposiums to garner information on evidence-based and promising practices related to specific health priority areas, particularly those identified in the PHA (e.g., drug overdose epidemic) or identified as an emerging issue. [Ongoing]
- I.3.2 Utilize internal intersectional teams to generate recommendations for ACHD based on adaptations of evidence-based practices or novel approaches for unsolved problem. [Ongoing]
- PL.1.1 Engage BoH and key stakeholders (attorneys/county council) in policy prioritization and evaluation. [Ongoing]
- PL.1.8 Identify specific opportunities for ACHD to play a role in policy that attacks poverty and reduces health disparities particularly relevant to PHA priorities [Ongoing]
- PL.2.1 Equip and educate county council, ACHD staff, state legislatures, and the public about the public health policy making process in Allegheny County [ongoing]
- PL.2.2 Increase capacity in public policy bureau to research/recognize windows of opportunity (including grant opportunities) [Ongoing]
- PL.3.1 Prioritize policies that would benefit from academic/scientific evaluation of impact on health outcomes and then join with academics to conduct evaluations, e.g. universal lead testing [Ongoing]
- PL.3.2 Use existing evidence both internally and externally to determine policy strategy for health improvement and then monitor health outcomes to better understand impact of policy change [ongoing]
- PL.4.1 Identify priority health outcomes and quantitative targets for health improvement through the ongoing community health assessment process. [Ongoing]
- PL.4.2 Establish clear timelines and formats for routinely reporting progress on health priorities to membership [ongoing]