2025 – 2030

# Strategic Plan

# Table of Contents


Acknowledgements ..... 2
Executive Summary ..... 3
Background ..... 5
Methods ..... 5
Vision, Mission & Values ..... 6
Strategic Goals, Objectives & Metrics ..... 6
- Community Trust ..... 7
- Evidence-Based Decision-Making ..... 8
- A Workplace Where Everyone is Valued ..... 9
- Streamline Internal Proccesses ..... 10

Operationalizing the Strategic Plan ..... 11
Appendix A: Questions for Surveys ..... 12
Appendix B: Strategic Plan Review Meetings ..... 13
- Conducting a Strategic Plan Review Meeting ..... 13
- Tips for Running a Good Strategic Plan Review Meeting ..... 13

# Acknowledgements

Thank you to everyone who contributed to the strategic planning process:

### SPOKANE REGIONAL HEALTH DISTRICT STAFF

- Alicia Thompson, Administrative Officer
- Adam Swensen, Community Worker 2, Health Equity
- Danielle Stoddard, Director, Human Resources
- Dawnya Sanders, Program Manager 1, Treatment Services
- Dr. Francisco Velázquez, Health Officer
- Jennifer Hansen, Health Program Specialist 3, Healthy Living
- Joshua Pierce, Program Manager 2, Healthy Living
- Kasey Wilberding, Environmental Health Specialist 3, Environmental Public Health
- Kelli Hawkins, Director, Public Information & Government Affairs
- Kim Kramarz, Division Director, Finance
- Kira Lewis, Public Health Nurse 2, Communicable Disease Investigation & Prevention
- Lola Phillips, Deputy Administrative Officer
- Mark Springer, Program Manager 2, Communicable Disease Investigation & Prevention
- Melissa McDaniel, Division Director, Community Health
- Misty Challinor, Division Director, Treatment Services
- Ray Byrne, Division Director, Environmental Public Health
- Ryan Drobny, Research Scientist 1, Data Center
- Robert Hammett, Information Technology Manager, Information Technology

### BOARD OF HEALTH

- Amber Waldref, Spokane County Commissioner, District 2
- Patricia Kienholz, Public Health Consumer

### COMMUNITY PARTNERS

- Hadda Estrada, Better Health Together
- Ryan Oelrich, Priority Spokane
- Dr. Wilfred Madarang, CHAS Health

### VILLAGEREACH FACILITATORS

- Erin Larsen-Cooper, Director
- Emily Gibson, Manager

SPOKANE REGIONAL HEALTH DISTRICT

**Contact:**

Alicia M. Thompson, DrPH, LMSW
Administrative Officer
1101 W. College Ave.
Spokane, WA 99201
Phone: 509.324.1500
E-mail: athompson@srhd.org

VILLAGE REACH Rx

# Executive Summary

**The Spokane Regional Health District (SRHD) completed a robust strategic planning process from June 2024 to February 2025 to ensure an effective approach to addressing the county's health priorities. The process incorporated the following:**

### Accreditation Standards

The strategic planning process was guided by the Public Health Accreditation Board's strategic planning standards.

### Collaborative Approach

The plan was created by a committee of executive leadership, management, non-managerial staff, Board of Health representatives and community partners. Feedback from staff was incorporated throughout the process.

### Data-Driven

Priorities were determined from the Community Health Assessment, staff and partner surveys, client surveys and a SWOT analysis.

## VISION

Healthy lives.
Safe environments.
Thriving communities.

## MISSION

As a leader in public health, we partner with the community to protect, promote and improve the health, wellness, safety and quality of life for all people in Spokane County.

## VALUES

### Collaboration

We actively seek partnerships to leverage our collective strengths for a common purpose.

### Financial Stewardship

We use public funds responsibly and impactfully to improve health outcomes.

### Health Equity

We respond to the evolving needs of our community by removing barriers and offering support to provide everyone the best chance at a healthy life.

### Integrity

We are accountable to our community and can be relied on to be trustworthy, accurate and evidence-based.

# Strategic Goals

## SRHD is visible and trusted in the community

Building trust and visibility with the community is essential for achieving SRHD's mission. SRHD will make progress toward this goal by being a trusted and accessible source of timely information; ensuring staff and the public understand the role of public health in addressing community health priorities; and building strong partnerships through two-way communication and co-creation of programs.

## SRHD is a model for evidence-based decision-making

Using data to assess and monitor the population's health, to investigate, diagnose and address health hazards, and to evaluate and improve programs are at the foundation of public health. To achieve this, SRHD will equip staff with the necessary roles, responsibilities, and skills to use data effectively; maintain data infrastructure and policies that facilitate collaboration and protect data integrity; implement a model for evidence-based decision-making across all divisions and programs; and ensure community partners can access SRHD data resources.

## SRHD is a workplace where everyone is valued

Demonstrating to employees that they are valued and that their well-being is a priority is essential for SRHD to recruit and retain highly qualified staff and create an effective and productive work environment. SRHD will focus on recruiting and retaining highly qualified staff; fostering open communication, trust, and inclusivity with executive leadership and managers; supporting staff mental health and well-being; providing access to training and professional development; and ensuring a transparent succession strategy.

## SRHD processes are transparent, efficient, and consistent

Good policies are critical to ensuring fairness, fostering trust, and streamlining operations. To accomplish this goal, SRHD will ensure district-wide policies, procedures, and administrative processes are clear, accessible, and searchable; align program and division policies with SRHD goals and values; foster an informed, positive culture around policies; and promote transparent, efficient, and consistent internal collaboration.

# Background

Spokane Regional Health District (SRHD) is one of 34 local public health jurisdictions serving Washington State's 39 counties. The health district was originally established as the Spokane County Health District (SRHD) in January 1970, when the City of Spokane and Spokane County merged their health departments. In 1994, the official name was changed to Spokane Regional Health District to reflect the increased scope of public health services and geographic coverage. SRHD's Board of Health is the governing body of the health district, uniting the cities and county in a cooperative effort to oversee all matters pertaining to public health. SRHD has about 270 employees and serves over 500,000 in Spokane County.

In June of 2024, SRHD engaged VillageReach to facilitate a strategic planning process to ensure a coordinated and effective approach to addressing the district's priorities. A strategic plan sets forth what an organization plans to achieve, how it will achieve it and how it will know if it has been achieved. The strategic plan provides a guide for making decisions on allocating resources and pursuing strategies and priorities. The strategic plan focuses on the entire health district. Programs may create plans that complement and support the district's strategic plan.

Going forward, the SRHD team will review, update, and monitor their progress toward achieving the goals and objectives laid out in this plan. The plan is not static. In the cases of major changes – new health hazards or significant transitions in staffing or funding, as examples – the plan can and should be revisited and goals re-envisioned or re-prioritized. Activities and work planning will be revisited annually to ensure that the year's activities will advance the district toward meeting its strategic goals and objectives, based on the progress made in the previous year. SRHD can evaluate if any other changes need to be made to the goals and objectives at that time.

# Methods

SRHD utilized a multi-method, collaborative approach to their strategic plan that aligns with standards for strategic planning outlined by the Public Health Accreditation Board. The process was led by a Strategic Planning Committee that consisted of representatives from executive leadership, management, non-managerial staff, the Board of Health, and community partners.

To ensure the strategic planning process was data-driven and responsive to diverse perspectives and needs, SRHD utilized the following sources to inform their strategic planning process:

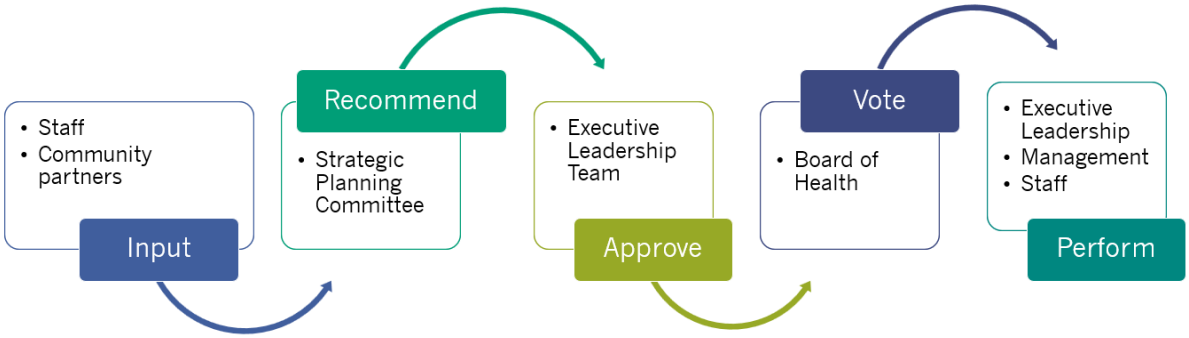
1. A review of Spokane County's most recent Community Health Needs Assessment
2. A review of all onboarding and exit surveys completed by staff in 2023 and 2024
3. Client surveys conducted by the Nurse Family Partnership and HIV Case Management programs
4. Key informant interviews with Human Resources and Finance leads
5. Strengths, weaknesses, opportunities, and threats (SWOT) analysis with input from executive leadership, management, and an anonymous staff survey
6. Results from an anonymous survey sent to staff, the Board of Health and community partners

All staff had the following opportunities to give feedback during the strategic planning process:

- An anonymous survey conducted before the plan was drafted that asked for feedback on SRHD strengths, weaknesses, and potential priorities for the strategic plan

- An in-person “data walk” where staff could review and comment on the data that was used as the basis for the strategic plan
- An anonymous survey to give feedback on the plan’s core components

Decisions on what to include in the strategic plan were made using the process below. The strategic plan was approved by the Board of Health on Feb. 27, 2025.




# Vision, Mission & Values

# Strategic Goals, Objectives & Metrics

By the end of February 2030, SRHD aims to achieve the following goals:

1. SRHD is visible and trusted in the community.
2. SRHD is a model for evidence-based decision-making.
3. SRHD is a workplace where everyone is valued.
4. SRHD processes are transparent, efficient, and consistent.

Details on why these goals were chosen, the objectives required to achieve them and the metrics that will be used to measure success are outlined in the following pages.

# COMMUNITY TRUST

**Goal 1: SRHD is visible and trusted in the community.**

## RATIONALE

Building trust and visibility with the community is essential for achieving SRHD's mission. Staff and partners identified community trust and community awareness of SRHD's work as a key measure of success for the strategic plan. SRHD has a solid foundation to build upon. A strong community presence and robust partnerships came up frequently as one of SRHD's strengths in surveys. There are also areas where SRHD can improve, including faster and more transparent communication with partners and greater trust and visibility with marginalized communities.

## OBJECTIVES

1. SRHD is a trusted and accessible source of timely information especially for communities most impacted by health inequities.
2. Staff and the public understand SRHD's roles and responsibilities to address health issues prioritized in the Community Health Improvement Plan.
3. SRHD has strong partnerships with philanthropic organizations and public-private entities to address public health issues.
4. SRHD maintains strong two-way communication with key community segments such as healthcare, K-12 education, housing service providers and government agencies.
5. SRHD staff understand health equity and apply it through co-creation with community organizations and leaders in developing and implementing projects, programs, communications, and budgets.

## METRICS

In addition to tracking the completion of activities for each objective, metrics will be reviewed regularly to evaluate whether activities are having their intended impact.

| Objective | Metrics |
|---|---|
| **Trusted & reliable source of information** | • Increased number of engagements with website and social media<br>• Increased number of resources on the website in languages other than English<br>• Increased number of real-people stories in communication outlets |
| **Clear role in Community Health Improvement Plan Priorities** | • Increased community understanding of SRHD role demonstrated in the Quality-of-Life Survey<br>• Increased staff understanding of SRHD role demonstrated in an annual staff survey (See Appendix A, Question 1) |
| **New and enhanced partnerships** | • Increased partnership strength according to a community partner survey |
| **Consistent two-way communication** | • Increased number of external partners reading SRHD's newsletters<br>• Results from an annual survey of participants on the impact of meetings with healthcare and education partners |
| **Enhance health equity and co-creation** | • Increased "health equity" scores on the annual staff survey (See Appendix A, Question 2) |

# EVIDENCE-BASED DECISION-MAKING

**Goal 2: SRHD is a model for evidence-based decision-making.**

## RATIONALE

Using data to assess and monitor the population's health, to investigate, diagnose and address health hazards, and to evaluate and improve programs are at the foundation of public health. In the partner and staff surveys, external partners highlighted SRHD's ability to collect, analyze and share data to inform public health strategy as a key strength. Staff highlighted the importance of evidence-based decision-making to build community trust and ensure the effectiveness of programs. To build on this strength, SRHD will increase staff skills, create policies and infrastructure to support evidence-based and transparent decision-making and ensure that community partners are aware of SRHD data resources.

## OBJECTIVES

1. Staff are equipped with the necessary roles, responsibilities, and skills to enable program staff to use data effectively in their day-to-day work and enable data center staff to concentrate on the organization's most critical data needs.
2. SRHD data infrastructure and policies facilitate collaboration, protect data integrity, and stay current with changes in technology and public health informatics.
3. SRHD has a model for evidence-based decision-making that is used across all divisions and programs.
4. Community partners are aware of and access SRHD data resources to support informed decision-making.

## METRICS

| Objective | Metrics |
|---|---|
| **Roles, responsibilities, and skills** | • Increased program staff participation in the Data Science Community of Practice and Quality Council |
| **Infrastructure and policies** | • Metrics to be determined in Year 2 after a gap analysis of current data infrastructure and data policies conducted |
| **Model for evidence-based decision-making** | • Every program has clearly defined key performance metrics that are regularly reviewed |
| **Partner awareness and access** | • Increased use of data by partners according to a community partner survey<br>• Increased number of views or downloads of online data |

# A WORKPLACE WHERE EVERYONE IS VALUED

**Goal 3: SRHD is a workplace where everyone is valued.**

## RATIONALE

Demonstrating to employees that they are valued and that their well-being is a priority is essential for SRHD to recruit and retain highly qualified staff and create an effective and productive work environment. Staff surveys highlighted work-life balance and flexibility as key strengths of SRHD, along with areas for improvement including communication, trust, and transparency between staff, executive leadership, and managers, and enhancing staff morale. To further build a supportive and inclusive workplace, SRHD will build on these strengths while addressing areas for improvement.

## OBJECTIVES

1. SRHD recruits and retains highly qualified staff.
2. Executive leadership and managers model open communication, trust, and inclusivity.
3. SRHD fosters an environment that supports mental health and well-being among employees.
4. Staff have access to the training and professional development opportunities they need to do their jobs and grow in their careers.
5. SRHD has a transparent succession strategy.

## METRICS

| Objective | Metrics |
|---|---|
| **Recruit and retain staff** | • Reduction in staff turnover (disaggregated by division)<br>• Increased number of staff utilizing tuition reimbursement<br>• 100% of staff complete annual review |
| **Open communication, trust, and inclusivity** | • Increase staff reporting “yes” to the question: “I am feeling welcome here.” on 90-day onboarding surveys<br>• Decrease in staff reporting that difficulty with management was “extremely” or “very” influential in their decision to resign<br>• Improved scores on the Augusta scale (See Appendix A) |
| **Employee well-being** | • Improved scores on the Augusta scale (See Appendix A) |
| **Training and professional development** | • 100% of staff have completed an introduction to public health training<br>• Improved scores on the Augusta scale (See Appendix A) |
| **Career pathways and succession plans** | • % of management and executive leadership positions filled with qualified internal candidates |

# STREAMLINE INTERNAL PROCCESSES

**Goal 4: SRHD processes are transparent, efficient, and consistent.**

## RATIONALE

Transparent, efficient, and consistent policies are critical to ensuring fairness, fostering trust, and streamlining operations. The staff survey highlighted transparency, efficiency and consistency in policies and procedures as areas for improvement. SRHD is dedicated to implementing processes and procedures that enable efficient operations and promote program effectiveness.

## OBJECTIVES

1. District-wide policies, procedures and administrative processes are transparent, efficient, and consistent.
2. District-wide policies and processes are clear, accessible, and searchable.
3. Program and division policies and procedures are aligned with SRHD goals and values, well understood, and communicated to relevant staff.
4. SRHD has an informed, positive culture around policies that focuses on the benefits of policies and procedures and how they align with the values and goals of the district.
5. Internal collaboration is transparent, efficient, and consistent.

## METRICS

| Objective | Metrics |
|---|---|
| **Transparent, efficient, and consistent district-wide policies** | • % of district-wide policies and procedures updated on schedule<br>• % of district-wide policies that align with the Peabody Method |
| **Clear, accessible, and searchable district-wide policies** | • # of district-wide policies stored in a centralized location |
| **Well-understood program and division policies aligned with SRHD goals and values** | • Clearly documented approval process for all program and division changes<br>• New program and division policies and/or changes are shared with all relevant employees for awareness<br>• Electronic access for all communication and change plans |
| **Informed, positive culture around policies and procedures** | • Improvement on policy related question(s) from annual staff survey (See Appendix A, Question 3)<br>• 100% of employees sign acknowledgment of policies and procedures |
| **Internal collaboration is transparent, efficient, and consistent** | • Improved scores on the Augusta scale (See Appendix A, Question 10) |

# Operationalizing the Strategic Plan

This strategic plan will be operationalized using four main tactics:

## ENSURE INTERNAL UNDERSTANDING OF THE STRATEGIC PLAN

All staff – existing and new – must be aware of the strategic plan and fully understand all its elements. The more staff regularly engage with the plan, the more likely they are to use the strategic plan in decision making. To ensure internal understanding of the strategic plan, SRHD will:

- Provide staff with a copy of the plan and ensure time for questions during staff orientation.
- Post the mission, vision, and values somewhere staff can frequently see it, such signs posted on the walls or making it visible on the lockscreen.
- Store the electronic version plan in a central location that all staff have access to.
- Regularly share progress toward achieving the goals and objectives of the strategic plan during the Staff Forum and/or in the Hubbub.
- Reference the plan when communicating to staff on SRHD decisions, resource allocation and scope of work.

## PROMOTE EXTERNAL AWARENESS OF THE STRATEGIC PLAN

The strategic plan is an important communication tool for partners and the public to explain why SRHD exists, its key priorities, and how it approaches its work. To communicate the strategic plan externally, SRHD will:

- Create a press release to announce the adoption of the strategic plan.
- Post a copy of the strategic plan, in multiple languages, on the website.
- Host an annual "State of the Health District" forum to share progress on the strategic plan.

## USE OF STRATEGIC PLANNING IN DECISION-MAKING

A strategic plan helps organizations prioritize how to allocate time and resources. The following outlines how the strategic plan is used in decision-making at the organizational and individual level.

- Create a checklist or form for new work and/or funding proposals to evaluate how work aligns with the strategic plan.
- Programs and divisions create plans on how they can enact the strategic plan within their team or scope of work.
- Supervisors have regular meetings with staff to discuss their goals and how they relate to the strategic plan.

## HOLD REGULAR STRATEGIC PLAN REVIEW MEETINGS

The executive leadership team will review progress on the strategic plan at least quarterly. Results from the review meetings will be shared with all staff and the Board of Health. Progress toward the metrics will be reviewed at least once per year. The review meeting brings staff together to reflect on what is working and what course adjustments are needed. Changes are needed more frequently at the granular level. For example, the workplan will change at least annually. If there are major changes to the context, fundamental shifts in priorities, or aspects of the plan that truly aren't working or benefiting the team, then the goals and objectives can and should be changed. The best practices for strategic plan review meetings are in Appendix B.

# Appendix A: Questions for Surveys

Questions 1 is adapted from Wilder Collaboration Factors Inventory. Question 2 is from the staff assessment currently conducted by the Health Equity team. Question 3 is taken from the National Institute for Occupational Safety and Health Well-being Questionnaire. Questions 4 through 24 are from the Augusta Scale, aligned with the Office of the Surgeon's General's framework on workplace mental health and well-being. When possible, data will be disaggregated by division and program. Each question is scored on the following scale:

a. Strongly disagree
b. Somewhat disagree
c. Somewhat agree
d. I strongly agree
e. Not applicable

## SURVEY QUESTIONS

1. I have a clear sense of SRHD's role and responsibility in addressing [X priority].[1]
2. I know how to incorporate health equity practices into my work.
3. SRHD systems and processes adequately support me to get my work done effectively.
4. I feel safe from any physical harm.
5. I am aware of policies and programs related to diversity, equity, inclusion, and accessibility.
6. I feel safe from psychological harm.
7. I can talk freely about mental health issues.
8. I can get support for mental health issues.
9. I am able to get adequate rest.
10. I am able to collaborate with others and work in a team.
11. I am able to create trusted relationships with colleagues.
12. I feel that I belong to a team.
13. I feel included in my team.
14. I have autonomy in my work environment.
15. I am able to take paid leave.
16. My colleagues respect my boundaries between work and non-work time.
17. I can develop my own work schedule.
18. I can make my work schedule as flexible and predictable as possible.
19. I earn a living wage (i.e., a wage that is high enough to maintain a normal standard of living).
20. I am involved in workplace-related decisions.
21. I feel connected to the organization's mission.
22. My contribution is acknowledged and rewarded from time to time.
23. I receive sufficient opportunities for training, education, and mentoring. I regularly receive appropriate feedback on my work.
24. I have clear and equitable pathways for career advancement.

[1] Ask the question separately for each of the top 3 CHIP priorities.

# Appendix B: Strategic Plan Review Meetings

## CONDUCTING A STRATEGIC PLAN REVIEW MEETING

Each strategic plan review meeting should cover four essential agenda items:

### 1. REVIEW OF METRICS

Have responsible team members update the results into the metric tracking sheet before the meeting. Metrics can be simple – such as a red, yellow, green rating on progress – if they give an honest indication of progress. The group then reviews the metrics together to see if they are on track to achieve the objective.

### 2. PROBLEM IDENTIFICATION

For indicators that are on track or exceeding expectations, take a moment to celebrate success, recognize individual contributors, and call out some of the reasons that enabled the success. Then identify indicators that are not on track for further discussion. Effective strategic plan reviews often spend the bulk of their time on indicators that are not progressing.

### 3. ROOT CAUSE ANALYSIS

Root cause analysis can be structured or simply free discussion on what is inhibiting progress. Sometimes people use the "Five Whys" approach in which for each problem identified, the team asks "why?" until they get from the surface answer (e.g., we don't have time) to a deeper root cause (e.g., we are spending our time on the wrong things).

### 4. ACTION PLANNING

By the end of the meeting, you want to identify key actions for addressing challenges and overcoming root causes. Action items should be time-bound, assigned to an individual and followed up at the next meeting. A review of action items from the last meeting should be a standing agenda for future meetings. If action items are completed but progress is still stalled, you may need to relook at your root cause analysis to try new tactics.

## TIPS FOR RUNNING A GOOD STRATEGIC PLAN REVIEW MEETING

- Integrating strategic plan reviews into an existing meeting – like a regularly occurring staff or team meeting – decreases the burden of setting up a new meeting, finding a time, and ensuring the meetings are sustained.
- Ensure you have adequate time to discuss challenges and determine action items. This may mean extending your meeting time to accommodate discussion or splitting the review up into multiple meetings. For example, you could hold a review meeting each month, focusing on only one strategic goal per month.
- Ensure you have the correct people at the meeting. You should ensure that you have the following people present:
    - Those who are close to the work and are responsible for the day-to-day tasks that help enable progress toward your objectives.
    - Leaders with decision-making authority to help team members follow up on action items and enable staff to make needed changes to their work.
    - People who view the work from different disciplines or perspectives.

- Start with the metrics and data you have. The review meetings may illuminate challenges with how you measure progress or additional information you want/need to better evaluate progress. This is to be expected, and you can make changes and improvements to your metrics over time.
- Executive leadership buy-in and participation is essential. Leadership can show support for the process by:
    - Showing up to strategic review meetings; rarely cancelling or missing them.
    - Fostering candid discussion where it's okay to illuminate and discuss challenges.
    - Supporting the team in addressing challenges, unblocking issues, and escalating issues that may require wider institutional support.
    - Acknowledging and celebrating team and individual successes. Examples may include verbal acknowledgement of team or individual success inside and outside the review meetings, thank you cards (or emails) celebrating success, giving a formal or informal award to the team with the biggest improvement since the last meeting and allowing for things like cheering and applause in meetings.