1. **Community Description**

Briefly characterize the community(ies) served by your agency (location, population served, jurisdiction type, organization structure, etc.). The purpose of this section is to provide context to a reader who may be unfamiliar with your agency.

Butte County is situated on the east side of Northern California’s Sacramento Valley and covers 1,640 square miles between the Sacramento River to the west and the Sierra Nevada Mountains to the east. The County is home to a population of more than 220,000 people, who live in the incorporated cities of Biggs, Chico, Gridley, Oroville, (the county seat), and the Town of Paradise.

The Butte County Public Health Department (BCPHD) provides a wide range of services in more than 50 programs that are designed to promote and protect the health of all County residents and visitors. The department strives to address the core public health functions as mandated by the State of California. These essential functions consist of promoting and protecting community health through attention to women and children’s health issues and communicable and infectious diseases, planning for and responding to disasters, providing adult indigent care and protecting our County’s valuable natural resources while improving the environment.

For more information related to Butte County and services provided, visit the county’s website at [http://www.buttecounty.net/](http://www.buttecounty.net/) or BCPHD’s website at [http://www.buttecounty.net/publichealth/](http://www.buttecounty.net/publichealth/)

2. **Project Overview**

Provide an overview of the work your agency conducted with or because of this funding, including the significant accomplishments/deliverables completed during the ASI project period and the key activities engaged in to achieve these accomplishments. This should result in a narrative summary of the chart you completed in Part 1, in a format that is easily understandable by others.

During the 2014-15 ASI grant period, Butte County Public Health Department (BCPHD) completed a department Strategic Plan. BCPHD hired a sub-contractor (Pearls of Wisdom Consulting, WA) to assist with plan facilitation and development. A strategic planning committee consisting of 10-15 cross divisional executive staff was assembled.

In February 2015, a workshop was conducted with the planning committee to provide a strategic planning orientation, complete a SWOT analysis and examine the department’s vision, mission and values. A second planning workshop was held in March to identify and discuss possible objectives, strategies, accountability links and time-framed performance measures that aligned with the department’s vision/mission/values, Community Health Assessment, and Quality Improvement processes. BCPHD decided to utilize a “Balanced Scorecard” approach and developed...
goals/objectives in the following categories 1) Prevent/Promote/Prepare 2) Business/Finance 3) Customer/Partner Excellence 4) Employee Excellence.

Once the department’s draft goals and objectives were developed, additional workshops were held with both internal staff and external community partners for review and feedback. The strategic planning committee monitored the process to ensure that all PHAB 5.3.2 requirements were met. The completed plan was launched to both staff and the public in May 2015.

3. **Challenges**

Describe any challenges or barriers encountered as your agency worked to complete the selected deliverables. These can be challenges your agency may have anticipated at the start of the initiative or unexpected challenges that emerged during the course of implementing your proposed activities and completing your deliverables. If challenges were noted in your interim report, please do include them here as well. Please include both tangible (e.g., natural disaster, leadership change) and intangible (e.g., lack of staff engagement) challenges.

Challenges and/or barriers encountered during the project include:
- Key management positions (Assistant Department Director, Nursing Director) were vacant during the planning process.
- Difficulties with engaging all department staff for input/feedback during the short timeframe to complete the project (3 months).
- Alignment with other key programs (CHIP, Performance Management, and Quality Improvement) still needs to occur as these initiatives are in progress or have yet not started.
- General unfamiliarity of PHAB and/or accreditation from both staff and external community partners.

4. **Facilitators of Success**

Describe factors or strategies that helped to facilitate completion of your agency’s work. These can be conditions at your agency that contributed to your successes or specific actions you took that helped make your project successful or mitigated challenges described above. Please include both tangible (e.g., influx of funds from another source) and intangible (e.g., staff or leadership engagement) facilitators.

Facilitators of Success Include:
- Commitment of all department personnel to complete the project in the required timeframe.
- Quality review and feedback from internal staff and community partners.
- Quality consultants who helped facilitate the process and develop materials.
- Commitment of the department to become an accredited health agency.
- Existing collaborations that are in place between the department and external partners.
- Willingness of the department to learn and adopt new initiatives such as performance management, workforce development and quality improvement.
- Multiple staff had been involved in the department’s previous strategic planning efforts.
5. **Lessons Learned**

*Please describe your agency’s overall lessons learned from participating in the ASI. These can be things you might do differently if you could repeat the process and/or the kinds of advice you might give to other health departments who are pursuing similar accreditation-related funding opportunities or technical assistance activities.*

<table>
<thead>
<tr>
<th>Lessons learned and/or advice for other departments:</th>
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<tbody>
<tr>
<td>• Have the CHA/CHIP completed before strategic planning begins to ensure alignment and incorporation.</td>
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<td>• Align department objectives with both state and local initiatives.</td>
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<tr>
<td>• View strategic planning as a holistic, continuous quality improvement-based activity that aligns both program work plans and individual performance plans.</td>
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<td>• Utilize the strategic plan as a foundational tool for meeting the PHAB requirements.</td>
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<tr>
<td>• Develop strategic plan goals/objectives based off the results of department SWOT analysis and activities.</td>
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<tr>
<td>• Ensure all department programs are represented on the strategic planning committee.</td>
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<tr>
<td>• Ensure a performance management system is in place to track strategic performance measures.</td>
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6. **Funding Impact**

*Describe the impact that this funding has had on your agency. How has this funding advanced your agency’s accreditation readiness or quality improvement efforts?*

Receiving ASI funding has had a significant impact on our department’s ability to apply for and achieve public health accreditation. The previous BCPHD department strategic plan was completed in 2011. Since our last strategic planning process, the department has implemented a large number of personnel, operational and philosophical changes. Items of note include the introduction of public health accreditation, development of a countywide CHA/CHIP (in progress) and implementation of performance management, quality improvement, workforce development and cultural competency activities. The listed initiatives were not addressed in the previous strategic plan, emphasizing how important this planning cycle was to our accreditation readiness efforts.

7. **Next Steps and Sustainability**

*What are your agency’s general plans for the next 12-24 months in terms of accreditation preparation and quality improvement? How will the work completed as part of the ASI be sustained moving forward?*

BCPHD plans to submit our application to PHAB by September 2015. Developing a Strategic Plan through the ASI program has allowed the department to lay a foundation for meeting all the PHAB requirements. We have succinct department wide measures that will be tracked regularly with progress relayed both internally and to the public. Completing the Strategic Plan was a major milestone in meeting the 3 PHAB pre-requisites, and will allow us to “hit the ground running” on
our journey to becoming an accredited health department.