



## **Letter from the Director**

Dear fellow Houstonians,

I am pleased to present our strategic plan for 2018-2022. The Houston Health Department (HHD) is responsible for protecting and promoting the health of 2.3 million residents of the City of Houston. As the fourth largest city in the country, we cover a vast geographic area of over 600 sq. miles. The strategic plan will help guide our work for the next five years.

The public health and healthcare landscape is continuing to evolve and change. Navigating change requires strategic thinking, adaptability, and a long-range vision. I expect, not only the leadership, but every single member of our staff to meet the challenges head on. I ask that all HHD staff remain connected to our vision and mission. I also ask that each HHD employee considers how his or her everyday tasks are contributing to meeting the long term collective vision for our Department and in fulfilling the ten essential functions of public health.

Reducing health disparities and improving health requires that we focus on the root causes and determinants of poor health in our communities such as poverty, education, employment, housing, access to healthcare, clean air and water, and access to healthy foods. The needle on many of these determinants can best be shifted through policy level intervention at various levels. For many of these determinants of health, the solutions lie in HHD working with other public and private partners, in sectors such as education, housing and law enforcement, justice, and community development.

This document will serve as a guide for HHD, as we move forward. It not only guides the services and programs that we provide, but also addresses infrastructure components that are required to successfully do our work. These components are intersectoral partnerships, effective communication, cultural and linguistic competency, data and outcome evaluations, and new funding mechanisms.

I thank you for allowing us to serve you and together we can build a city of healthy people living in healthy communities.

Sincerely,

Stephen L. Williams, M.Ed., MPA Director, Houston Health Department

Stephen / William

## **Vision**

Self-sufficient families and individuals in safe and healthy communities

## Mission

The mission of the Houston Health Department is to work in partnership with the community to promote and protect the health and social well-being of Houstonians and the environment in which they live.

## **Values**

- Accountability
- Quality
- Integrity
- Teamwork/Cooperation
- Pro-action
- Innovation

- Compassion
- Competency
- Diversity
- Efficiency
- Acceptance/Objectivity

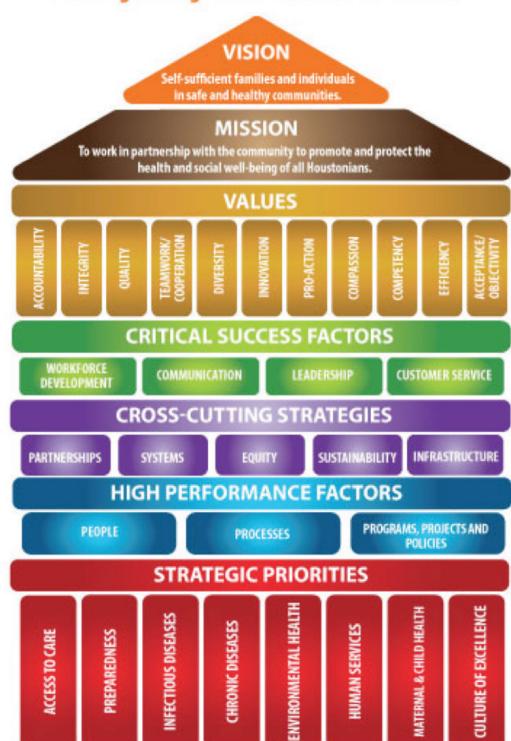
# **Cross-cutting Strategies**

- Develop and strengthen quality partnerships
- Utilize information technology systems optimally
- Support intersectional initiatives to improve health
- Develop sustainable strategies
- Strengthen infrastructure



# Houston Health Department STRATEGIC FRAMEWORK

**Building Our Organization One Brick At A Time** 



## **Executive Summary**

This strategic plan was developed as a guide to steer the Houston Health Department for the next 5 years in the context of the rapidly changing health care and public health environment. This document is a summary snapshot of the HHD Strategic Plan for 2018-2022, which will serve as a guide-map for the Department goals over the next five years. The Office of Planning, Evaluation & Research for Effectiveness (OPERE) at HHD was charged with developing the Strategic Plan.

This plan not only focuses on the public health department's core activities but also on offering enhanced services to improve the health of Houstonians. The planning process was conducted using the Public Health Accreditation Board guidelines. This plan is one of the core components of the broader community health improvement planning process. The process unfolded in several steps, beginning in June 2016. These included a strengths, weaknesses, opportunities and threats (SWOT) analysis, conducting an environmental scan of ten data sources, gathering stakeholder input through focus groups analyzing data, and sharing results. Next steps included soliciting feedback, forming the strategic planning team, and determining priority goals and objectives.

After synthesizing the primary and secondary data, eight priority areas were identified for the Department. These are the HHD strategic priority areas for 2018-2022.

**Priority 1.** Access to Care

**Priority 2.** Infectious Diseases

**Priority 3.** Chronic Diseases

**Priority 4.** Environmental Health

**Priority 5.** Human Services

**Priority 6.** Maternal and Child Health

**Priority 7.** Preparedness

**Priority 8.** Culture of Excellence

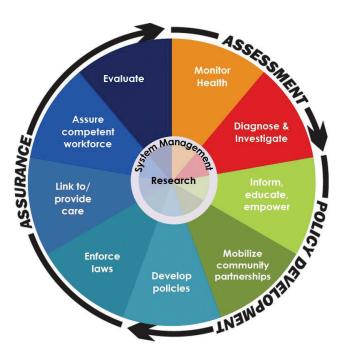
These priority areas will serve to guide the Houston Health Department during the five year period covered by the Strategic Plan. In addition, the goals and objectives for each priority area will provide a method to measure progress in these key areas as the department strives to continually improve service to the public. After obtaining feedback and finalizing the draft, the Director's Office will implement the strategic plan.

## **Description**

The City of Houston, the fourth largest city in the nation, is the home to approximately 2.3 million people. Between 2000 and 2010 Houston grew by 7.5%. The Kinder Institute of Urban Research at the Rice University attributes this growth rate largely to expansion of the immigrant population and migration from other parts of the U.S.

The population of Houston is very diverse. The 2016 American Community Survey data indicates that the racial/ ethnic proportions for Houston are: white 24.1%, black 22.0%, Hispanic 44.8%, and Asian 7.4%. A large proportion of the population, 22.2%, lacks health insurance, which is higher than the U.S. percentage of 8.6%. In Houston, 20.8% of residents live below the Federal Poverty Level (FPL) compared to 14.0% of U.S. residents. Poverty is highest among children under 18 years of age; 32.8% of Houston children live under the FPL. Both poverty and lack of health insurance are highest among minority populations.

### Ten Essential Public Health Services



The Houston Health Department (HHD) serves this diverse population. HHD is a full service health department that not only performs all the core functions of a Public Health Department but also many enhanced functions such as initiatives to address health inequities (Vision Partnership and Project Saving Smiles). HHD services benefit all Houston residents but the department also takes additional steps to support those most in need, such as low income mothers and children, the elderly, and minority populations.

HHD is the public health authority for the City of Houston, Texas. Established in 1840, HHD has grown to a department of 1,345 employees. As the public health authority, HHD provides a variety of services to all City of Houston residents to ensure the promotion of health, the prevention of diseases, and a safe environment. In 2014, the department received accreditation from the Public Health Accreditation Board. Houston was the first city in Texas and the second large city in the U.S. to have an accredited public health department.

HHD is organized into seven divisions, each with specific functions. The divisions are further organized into bureaus and offices. Through these divisions, HHD provides core public health services as well as enhanced services such as air and water quality monitoring, restaurant inspections, lead paint safety, cancer screening and family planning for the uninsured; communicable disease prevention and control; disease surveillance; birth and death certificates; leadership in emergencies such as hurricanes; services to seniors; WIC (Women, Infants and Children nutrition program); immunizations; and others. HHD operates 11 multi-service centers, 6 health centers, 14 WIC sites, the Harris County Area Agency on Aging, a regional reference laboratory, and multiple health and human service programs.

HHD, at its core, emphasizes the promotion of health equity throughout its programs and services. Robert Wood Johnson Foundation defines health equity as: "Everyone has a fair and just opportunity to be healthier. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care." Some of the HHD efforts and collaborations in the community promote health for all residents, especially for vulnerable populations.

## **Our Achievements**

HHD serves to promote and protect the health of Houstonians. The goal of public health is "well" care and not "sick" care, ie. we want to support and create conditions to keep our population healthy and not just care for them when they are sick. We want to focus on conditions that are "upstream" or the root causes of poor health. HHD's expansive view of the role of public health translates to influencing and impacting policies, systems, programs and areas that are the core determinants of health. Our staff are caring and compassionate and always go above and beyond the call of duty. We are proud of being public health ambassadors on day to day basis.

Some of our key achievements are related to promoting health equity as listed below.

## **Health Equity Initiatives**

- Affordable Care Act (ACA) leads partners in the Gulf Coast Marketplace Collaborative to provide outreach and enrollment assistance for the Affordable Care Act.
- AIM (Assessment, Intervention, Mobilization) - HHD staff visit selected low-income neighborhoods to collect data, provide links to services, and mobilize action.
- Project Saving Smiles provides dental screenings and sealants for permanent teeth for high-need second graders in Houston area schools. (9,030 served in fiscal year 2018)
- Vision Partnership holds vision screening events and provides glasses to low-income students in Houston area schools (11,000 served in fiscal year 2018).

- 1115 Medicaid Waiver conducts 15 programs that meet the HHS and CMS "triple" aim criteria of a) improving population health 2) delivering better health care, and 3) reducing health system costs.
- My Brother's Keeper Houston (MBK Houston) - serves as the backbone organization for over 200 partners that are working to improve opportunities and provide second chances for men and boys of color.
- Community Re-Entry Network re-integrates parolees with their families and communities and reduces recidivism.

In the community, HHD provides services for those most in need, targeting primarily low-income populations in households with family income below 185% of the poverty line. Many are undocumented and therefore not eligible for Medicaid or other resources for healthcare or services. HHD is a health care provider of last resort for these individuals. The department also effectively manages external grant funding to meet many of its goals; in FY 2016, funds from grants comprised \$54.6 million of the HHD annual budget of \$148.5 million.

Even with all our achievements, there remains much to do. This strategic plan documents the goals and objectives that we will meet over the next five year period. The cross cutting strategies that HHD will use to achieve these goals and objectives are developing and strengthening partnerships, utilizing information technology systems optimally, supporting intersectoral initiatives to improve health, developing sustainable strategies, and strengthening our infrastructure.

## **Background**

The goals and objectives for each priority area were developed by the Strategic Planning team in close collaboration with the respective program areas. Objectives were designed to be SMART (Specific, Measurable, Attainable, Relevant, and Timebased).

The objectives created through this process aligned with goals previously set by the HHD programs and with Texas state goals for public health, so that we could build on the progress we had already made. In many cases, baseline measures were available for the program. For these, the program set their goals to reflect benchmarks such as Health People 2020. If no baseline measures were in place, they were either developed or identified by the program. Each measure and indicator will be tracked by HHD

throughout the Strategic Plan period, to ensure progress in achieving the program goals.

The strategic plan was developed in alignment with Federal, State and local public health plans, and strategic decisions will be made based on the plan. The performance indicators from the strategic plan will be tracked by the HHD dashboard monthly. An operational plan or activity plan will be developed by programs along with implementation plans. In addition to tracking the measures and indicators, a continuous quality improvement plan will ensure that programs are addressing their challenges with steady improvement.

# **Priority I. Access to Care**

## **Description**

To maintain good health, Houstonians need access to quality health care. This involves being able to: access the healthcare system, reach a site where needed services are available, and find a health care provider who can consistently manage their treatment.

Medical costs in the U.S. are very expensive, so health insurance is key to accessing the healthcare system, including medical treatment, prescription drugs, and preventive checkups. In Houston, 29.3% of adults and 11.8% of children do not have health insurance, compared to U.S. values of 12.0% (adults) and 4.5% (children). Many of these residents are eligible for coverage through CHIP (Children's Health Insurance Program) and Medicaid, and can be assisted to enroll. Children may be

eligible for oral health preventative care through HHD and other public clinics.

Mental health services are frequently overlooked as a part of health care, but mental illness can impact every part of a person's life, including their physical health. Early assessment of mental illness and referral for treatment is especially helpful. Mental health can be improved through many avenues, including medication, professional counseling, peer counseling, mentoring and other structured programs, and improvement in home/family situations. In Houston, 12.4% of the surveyed adults reported that they had poor mental health for 14 or more days in the past month, compared to 11.4% in the U.S.

## **Goals**

### Goal 1: Improve access to health services in low-income populations

### **Objectives:**

- 1. Increase the proportion of the low-income population covered with health insurance by 2%.
- 2. Increase the proportion of persons who have a specific source of ongoing care by 5%.
- 3. Increase referrals to, and application assistance with, CHIP and Medicaid by 10%.
- 4. Increase the number of low-income children and adolescents who receive oral health preventive care by 1% per year.

### Goal 2: Ensure access to appropriate behavioral and mental health services

#### **Objectives:**

- 1. Increase the proportion of HHD staff trained to meet mental health needs by 2% per year.
- 2. Increase the proportion of adolescents who participate in mentoring programs by 5% per year.
- 3. Ensure that 100% of the children identified with possible mental challenges in the selected schools are referred for treatment.

#### **Action Items:**

1. Develop and implement mental and behavioral health awareness campaigns at the community level, targeting priority communities in Houston.

# **Priority III. Chronic Diseases**

## **Description**

Communicable diseases remain major causes of illness, disability and death. Thus, a strong approach to infectious disease prevention and control is essential to protect the public's health. HHD epidemiologists continually monitor infectious diseases to watch for potential outbreaks. Some infectious diseases, such as tuberculosis and HIV, must be tracked and infected persons treated, to protect the infected person, but also the general population.

Tuberculosis is a bacterial disease primarily affecting the lungs. It can take two forms—an active version (TB disease) or one that lies dormant within the body (latent TB infection or LTBI). TB was once the leading cause of death in the United States, but the use of antibiotics greatly reduced the rates of infection and mortality. However, TB is still common in other parts of the world. The TB rate in the Houston area (7.0 per 100,000 population in Harris County) is more than double the U.S. rate (2.9 per 100,000). Harris County also has more TB cases (279) than any other county in Texas; far ahead of Dallas County (157), which is next. Risk factors for TB are: being foreign-born, abusing alcohol, having diabetes, being a prison/jail inmate, having HIV/AIDS, homelessness, or being a healthcare worker.

Treatment for TB involves drug treatment for 6-9 months, so HHD teams track infected persons and ensure that they complete the treatment.

The HIV rate is measured by the number of new HIV diagnoses each year. The Houston/Harris County rate is 27.1 per 100,000 population, compared to 16.3 per 100,000 in Texas and 12.3 in the U.S. HHD teams provide HIV testing for the community, refer positive cases for treatment, and follow-up with contacts of new cases.

One of the most important interventions for infectious diseases is through vaccinations, which can prevent diseases such as polio and measles, and reduce the likelihood of contracting other infectious diseases such as flu. Still, in the U.S., vaccine preventable diseases kill thousands each year. Vaccines for children and the elderly are especially important. In Houston, 80.5% of children ages 19-35 months have been vaccinated with the recommended vaccine series. This percentage is less than the U.S. measure of 84.6%. In Harris County, 65.4% of adults aged 65 and older had an influenza vaccination in the past year, compared to 61.3% in the U.S.

## Goals

### Goal 1: Reduce the prevalence of TB in highly vulnerable populations

### **Obiectives:**

- 1. Maintain at least a 90% rate of adherence among individuals enrolled in 3HP.
- 2. Increase the proportion of individuals receiving a positive LTBI diagnostic test result who completed a clinical evaluation by 2% yearly.

## Goal 2: Reduce the incidence of vaccine-preventable diseases in HHD served population

- 1. Increase coverage with recommended immunization schedule in children aged 24-35 months by 1% per year.
- 2. Achieve 60% immunization coverage levels of up-to-date doses of HPV for females and males aged 13-18 years seen at HHD health centers.

### Goal 3: Reduce the incidence of HIV cases in the Houston area

### **Objectives:**

- 1. Increase the proportion of new cases interviewed by partner services within the recommended time by 5%
- 2. Provide a link to clinical care to at least 75% of new HIV/AIDS cases during the first 90 days of diagnosis.

## **Description**

Chronic diseases such as heart disease, cancer and diabetes are responsible for seven out of every ten deaths each year. Costs associated with these three chronic diseases account for 75% of the nation's health spending. Arthritis, another of the chronic diseases, is the leading cause of disability in the U.S., affecting one in five adults. Asthma and chronic lower respiratory diseases also result in high burdens of hospitalizations, restricted activities and death.

Half of all American adults have at least one chronic condition, and almost one out of three have multiple chronic conditions. According to the Centers for Disease Control and Prevention, much of the chronic disease burden is attributable to a short list of key risk factors; most US adults have more than one of these risk factors:

- High blood pressure (Houston = 30.4% of adults, U.S. = 31.9%)
- Tobacco use and exposure to secondhand smoke (currently smoke, Houston = 17.6% of adults, U.S. = 16.8%)

- Obesity (high body mass index) (Houston = 34.1% of adults, U.S. = 28.8%)
- Physical inactivity (no physical activity in past month outside job, Houston = 32.4% of adults, U.S. = 25.9%)
- Excessive alcohol use (binge drinking in past month, Houston = 15.8% of adults, U.S. = 16.3%)
- Diets low in fruits and vegetables (Houston = 81.3% of adults, Texas = 82.8%)
- Diets high in sodium and saturated fats

Diabetes is one of the most devastating of the chronic diseases; it can have a harmful effect on most organs in the body. It is also a disease that often responds to lifestyle changes, including diet and exercise. Diabetes is found more frequently in the Houston area (14.4% of the adult population) compared to Texas (11.4%) or the U.S. (9.9%). Diabetes education is one of the cornerstones of HHD chronic disease interventions.

## Goals

### **Goal 1: Provide chronic disease prevention and self-management opportunities**

### **Objectives:**

- 1. Increase the number of diabetes-diagnosed Houston residents receiving diabetes education by 5% from
- 2. Implement health education services on chronic disease(s) in four Houston Health Department Health Centers by 2021.

### Goal 2: Increase systems level chronic disease prevention strategies

### **Objectives:**

- 1. Increase the reach of the Get Moving Houston community nutrition program(s) by 5% by 2021.
- 2. Provide technical assistance for the implementation of active living strategies to three sectors other than health by 2021.

#### **Action Items:**

1. Maintain and enhance cross-sectoral representation on the Go Healthy Houston advisory task-force at 20 by 2021.

# **Priority V. Human Services**

## **Description**

The quality of one's environment can have a major effect on health. HHD monitors health risks in the Houston environment, including outdoor air quality, surface and ground water quality, toxic substances and hazardous wastes, indoor air pollution and other indoor hazards such as lead contamination, food safety, and swimming pool sanitation. The department can issue citations and take other regulatory actions if needed to ensure public safety. HHD also works to ensure that the public is aware of environmental risks and knows how to both avoid hazards and report hazards to authorities, if needed.

Houston has nearly 14,000 food establishments, including restaurants, bakeries, catering facilities, delis, bars, schools, daycares, movie theaters, gas stations, vending machines, mobile units (food trucks), outdoor and indoor events such as the Houston Livestock Show and Rodeo, supermarkets, church kitchens, processing plants, and

meat markets. HHD food service inspectors ensure that these establishments handle food in a manner that is safe for the public. HHD also provides training and licensing for food establishment managers and facilities.

Approximately 4,000 public and semi-public swimming pools/spas exist within the incorporated limits of the City of Houston. HHD regulates these facilities, and ensures public safety through annual inspections.

Children are at risk for lead poisoning if they live in older houses with peeling paint. Lead paint was banned in 1978, but most children in with elevated blood lead levels live in pre-1950 housing. Within the 610 Loop, approximately 25% of homes were built before 1950. HHD remediates older homes in Houston neighborhoods where children are exposed to lead-based paint and have high blood lead levels.

## Goals

## Goal 1: Empower the community to respond appropriately to environmental risks

### **Objectives:**

- 1. Increase the number of events at which HHD provides education and training about environmental risks and hazards by 25% per year (4 events).
- 2. Provide capacity-building and education about risks of lead exposure at a minimum of 4 health-related events each year.

## Goal 2: Protect the health status of the HHD communities from environmental risks

### **Objectives:**

- 1. Increase the percentage of aquatic facilities that pass routine inspection by 5%.
- 2. Reduce the number of restaurants reported for critical violations by 5% per year.
- 3. Reduce the average number of critical violations recorded on routine inspections at restaurants by 5% annually compared to the previous FY.
- 4. Increase the number of households at risk of lead contamination that were remediated at a minimum of 50 per year.

## **Description**

According to the University of Wisconsin Population Health Institute, 40% of our overall health is attributed to social and economic factors such as education, employment, income, family and social support, community safety, and the physical environment. Another 30% is due to health behaviors such as diet, exercise, avoiding tobacco and alcohol use, and responsible sexual activity. The HHD Human Services teams work to assist individuals and communities to improve quality of life by enhancing these factors. Human Services are important in Houston, in part because 18.8% of Houston families and 34.2% of children live below the poverty level, in neighborhoods with few resources. The U.S. poverty rates are lower, at 11.0% (families) and 21.2% (children).

HHD works to assist those who are most vulnerable. Among them are:

#### At risk youth populations

Graduating high school is an important personal achievement and is essential for an individual's social and economic advancement. According to the U.S. Office of Disease Prevention and Health Promotion, high school graduation leads to lower rates of health problems as well as lower risk for incarceration. In Houston, 77.4% of adults ages 25+ have a high school degree of higher, compared to the national percentage of 87.0%. Those with a high school degree can expect to earn more than \$10,000 per year more than those without a high school degree. College

graduates with bachelor's degrees will earn more than twice as much as those who have not graduated from high school and will also enjoy better health. To assist high risk youth, HHD has identified schools with poor graduation rates and other risk factors. These students receive assistance with academics, job training, interpersonal skills, after school programs, and other assistance to help them become successful adults.

#### The elderly

In Houston, 14.2% of people aged 65 years and over live below the federal poverty level, compared to 9.3% in the U.S. The elderly are also more likely to have health problems and to be isolated from resources. HHD assists the elderly with meals on wheels, benefit counseling, nutrition education, and more.

#### Those who are reentering their communities after incarceration

Incarcerated persons are more likely than the general public to have mental health concerns and substance abuse problems. Over 61% of women and 44% of men in prisons are estimated to have at least one mental health problem; approximately 65% of inmates meet the medical criteria for substance abuse or addiction. In addition, those who are newly released from prison often have difficulty reintegrating into their families and communities, and face barriers to finding employment.

## Goals

### Goal 1: Improve key health indicators in highly vulnerable youth populations

#### **Objectives:**

- 1. Increase the proportion of young people in selected schools that had a comprehensive wellness exam in the last 12 months by 5% per year.
- 2. Increase grade transition and graduation rate in schools in Houston's under-served communities by 5% per year.
- 3. Increase the proportion of youth who participate in extracurricular, out-of-school or after-school activities by 5% per year.
- 4. Increase the proportion of in-school youth who participate in work readiness programs by 5%.
- 5. Increase rehabilitation capacity at schools and in community-based settings by 10% by 2021.
- 6. Decrease recidivism for youth previously involved in the justice system by 10% by 2021.

(continued)

# **Priority VI. Maternal & Child Health**

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### Goal 2: Improve key health indicators in the vulnerable elderly population.

- 1. Increase benefits counseling assistance to older adults by 5%.
- 2. Increase the number of older adults receiving nutrition education and evidence-based programs that help manage or prevent chronic disease by 5%.

### **Goal 3: Minimize recidivism for individuals enrolled in the Community Reentry Network Program**

#### **Objectives:**

- 1. Increase the number of enrolled participants who receive treatment for mental health disorders in the Community Reentry Network Program by 5%.
- 2. Reduce the number of enrolled participants convicted for criminal offenses within three years post-release
- 3. Increase the number of enrolled participants that enter licensure/certification programs or other employment opportunities by 3%.

## **Description**

The health of mothers, infants and children reflects of the health status and quality of life of the community, and is a predictor of the health of the next generation. Health measures can include infant and maternal mortality, pregnancy-related complications, adolescent pregnancy, and child health and development. Infant mortality in Houston is 7.0 deaths per 1,000 live births. The U.S. rate is 6.0 deaths per 1,000.

Child abuse and neglect is particularly damaging; it impacts a child's physical and psychological health throughout their lifetime. It disrupts proper brain development, which can lead to sleep disorders, attention deficit disorder, hyper activity, eating disorders, depression, obesity, and other chronic diseases. In Harris County, 25,803 cases of alleged child abuse or neglect were assigned to Child Protective Services and were investigated in 2017, and 3,500 cases were opened for services.

Reproductive health is an aspect of maternal and child health that refers to the health and well-being of women related to reproduction, such as pregnancy planning, fertility issues, birth control methods, and protection from STDs. Family planning improves the health of both mother and infant, as pregnancies are spaced to accommodate the health and resources of the mother and family. Mothers with less than 12 years of education are more often likely to live in poverty, and their children frequently have lower educational attainment. In Harris County, 27.5% of new mothers did not graduate from high school, compared with 15.9% in the U.S.

Breast feeding gives infants a strong early start, as it provides ideal nutrition and many needed antibodies, and can increase the bond between mother and infant.

## Goals

### Goal 1. Reduce the incidence of child abuse and neglect among highly vulnerable **HHD** selected communities

#### **Objectives:**

1. Increase by 20% the number of HHD employees trained to identify and report child abuse

### **Goal 2. Improve reproductive health of low income women**

#### **Objectives:**

- 1. Provide family planning services for at least 4500 women through the Health Texas Women's (HTW) program at the 4 HHD health centers by August 31, 2019.
- 2. Maintain at least an 85% breastfeeding initiation rate for women within the Healthy Families, Nurse Family Partnership, and WIC Programs

# **Priority VII. Preparedness**

# **Priority VIII. Culture of Excellence**

## **Description**

Disasters of many kinds can strike a city population. In Houston, the most severe events have been caused by storms that bring strong winds and flooding. Recently, Hurricane Harvey resulted in more than 50 deaths in the Houston area, with 37,000 persons evacuated to shelters and over 300,000 homes flooded or otherwise affected by the storm.

A key part of the HHD role in the community is to assist victims of disaster to find safety during the event and access the resources to return to a normal life afterward. HHD works year-round to ensure that HHD staff members, community partners, and Houston residents are prepared to respond to disaster situations.

The Houston Health Department conducts regular emergency response training so that employees are ready to respond in disasters such as hurricanes. Following Hurricane Harvey, HHD activated 30% of the workforce, about 400 employees. HHD teams opened Multi-Service Centers to provide shelter and supplies, provided 24hour staffing at the George R. Brown Convention Center shelter and the City of Houston Office of Emergency Management, provided immunizations, tested water and soil samples, surveilled shelters across town to ensure sanitary conditions and food safety, established additional WIC locations, assessed and transported flood victims, and much more.

## Goals

### Goal 1. Minimize the impact of emergencies on the health of Houston communities

- 1. Ensure that 100% of Tier 2 Employees Complete Emergency Preparedness Training during the Required 6 *Month Time Period*
- 2. Ensure that 100% of Tier 1 Staff, including those with ICS Leadership and Liaison Roles Complete their Tier 1 Training During the Required 6-12 Month Time Period for their ICS Position
- 3. Increase the number of attendees to Public Health Preparedness events by 5% per year.
- 4. Ensure 100% of MCM dispensing PODs, Hurricane Evacuation, and Interim Shelters are prepared and fully operational.

## **Description**

The Houston Health Department has approximately 1,400 employees, from a wide variety of cultures, races, educational levels, skills and background experiences. HHD employees and their diversity are the central strengths of the department. HHD functions best when employees are well trained, motivated, culturally competent, and provide excellent services for the community. To meet this standard requires continual training and feedback from employees, managers, and the community. The Public Health Accreditation Board (PHAB) Standards and Measures provide additional guidance for ensuring excellence in service delivery. HHD also views continuous quality improvement as a priority to not only further develop staff, but to enhance the quality of services provided to Houston residents. The HHD Quality Improvement plan serves as a

tool to address any gaps identified in daily operations and in the implementation of the HHD Strategic Plan.

Another aspect of excellence concerns the department's efforts to promote health equity, where every person has the opportunity to attain his or her full health potential and no one faces a disadvantage because of social or economic circumstances. Lack of health equity can be seen in differences access to medical care, length of life, quality of life, frequency and severity of diseases, and rates of disability and death.

HHD also works to empower Houstonians to improve their neighborhoods, and acts with multiple partners to enhance the health promoting components of Houston communities.

## Goals

### Goal 1: Provide an organizational environment where employees feel valued

### **Objectives:**

1. Ensure 100% of identified employee training gaps are addressed

#### **Action Items:**

- 1. Develop a training development plan for managers and supervisors by 12/31/18
- 2. Develop an employee engagement plan by 12/31/2018
- 3. Develop a system that creates workforce development opportunities for HHD employees by 12/31/18
- 4. Develop an organization wide system for employee recognition by 12/31/18
- 5. Develop & implement a training, monitoring and compliance system regarding department policies by 06/30/19

### **Goal 2: Strengthen HHD infrastructure**

#### **Objectives:**

- 1. Increase the proportion of programs that use a continuous quality improvement process on an annual
- 2. Ensure that 50% of staff complete intermediate level of quality improvement training by 2019.

#### **Action Items:**

- 1. Complete the NACCHO Culture of Quality Self-Assessment Tool by December 2018.
- 2. Establish the new QI Committee and process for submitting formal QI projects by December 2018.

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# Goal 3: Ensure excellence in service delivery, programming planning and community engagement

### **Objectives:**

- 1. Train 80% of staff in basic principles of public health ethics by 6/30/2019.
- 2. Ensure 75% of staff are trained in cultural and linguistic competency by the spring of 2021.

#### **Action Items:**

1. Establish a staff training policy for cultural and linguistic competency by the Spring of 2018.

### **Foundational Objectives:**

- 1. Ensure that HHD policies, programming and services delivery models address the social, cultural, and linguistic characteristics of Houston's diverse populations and aligning to all state and federal regulations by 2020.
- 2. Ensure staffing diversity and inclusivity by 2020.
- 3. Implement a department wide marketing and communications strategy by 12/31/18.

#### **Action Items:**

- 1. Establish processes for document translation and use of interpretation services across HHD by June 2018.
- 2. Identify gaps in recruitment, hiring, placement and retention patterns.
- 3. Develop a quality improvement plan [to address results of the analysis].
- 4. Implement ongoing cultural competency staff and organizational assessments by October 2021.

### **Goal 4: Promote health equity within HHD**

#### **Foundational Objectives:**

- 1. Develop a comprehensive plan for community capacity building by 12/31/18 [includes community mobilization, strategic partnerships, advocacy and training].
- 2. Develop a process to incorporate a health equity framework through program development, performance and policy management and quality improvement by 12/31/21.
- 3. Provide community capacity building using the Bay Area Regional Health Equity Initiative framework and other resources through 2021.

#### **Action Items:**

- 1. Collaborate with Houston's Complete Communities initiative.
- 2. Incorporate Health in all Policies framework, supported by the American Public Health Association, in policy development, education and advocacy by 2021.

### **Goal 5: Improve effectiveness of HHD programs**

### **Objectives:**

- 1. Increase the number of programs that include tracking and measurement of outcomes in addition to outputs by 5 per year.
- 2. Increase dissemination of HHD results of scientific research by 10% annually.

### **Foundational Objectives:**

- 1. Develop and initiate a scaled implementation of an integrated data information management system.
- 2. Implement a HIPPA compliant GIS data portal for greater access to data.

## **Glossary & Definitions**

#### **Access to Care:**

Together, health insurance, local health care options, and a usual source of care help to ensure access to health care. Having access to care allows individuals to enter the health care system, find care easily and locally, pay for care, and get their health needs met.

- Low income population: Families that have an income of less than twice the Federal Poverty Level
- Behavioral health: Promoting well being in population by promoting or intervening to improve mental health conditions such as depression, anxiety, or other conditions; Behavioral health also includes substance abuse treatment or interventions.
- **Mental Health:** This refers to a state of psychological well-being and an absence of mental illness (pathology).

#### **Infectious Disease:**

Diseases that are caused by illness causing microorganism and can be transmitted from one person to another directly or through a medium or vector. These microorganisms include viruses, bacteria, parasites and fungi. These include new infections of sexually transmitted disease (STDs), new HIV cases, salmonella, cyclospora, zika, malaria and influenza. All infectious diseases are reportable conditions and any new case of infectious disease in the city is reported to HHD.

#### **Chronic Disease:**

These are diseases that persist over time and can be prevented or managed by an individuals. These are also the leading cause of death representing 70% of all deaths (being related to the condition or due to complications that developed due to the condition). The most common chronic diseases are heart disease, some cancers, diabetes, hypertension and asthma.

#### **Environmental Health:**

This refers to all environmental conditions outside of a person that can impact their health. These can be water, air, climate, sun, asbestos, smoking and radiation.

#### **Human Services:**

This area of Public Health includes meeting human needs (immediate or longer), promoting prevention and access to resources with the goal of improving quality of life.

#### **Maternal and Child Health:**

This area of Public Health focuses on improving the health and wellbeing of mothers, children and families. Improved health and well being of mothers and their children can affect the health status of future generations.

### **Preparedness:**

This area refers to the ability of the government at the local, State or Federal level to anticipate, prepare for, respond and assist recovery from natural and man made threats.

#### **Culture of Excellence:**

This refers to those areas of the Department infrastructure on which the Department needs to focus on for improved delivery of public health services in the context of Public Health 3.0 and to fulfill the vision of the department.

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