GOAL 1	STRENGTHEN AND SUPPORT THE PUBLIC HEALTH WORKFORCE	RESPONSIBLE PROGRAM/PERSON
	HUMAN RESOURCES	
Obj 1.1	By July 2017 and ongoing, 100% of MPHD supervisors will utilize MPHD Human Resources' guides for hiring, development and retention of employees.	Human Resources
	Tactic 1: By July 2016, 100% of MPHD supervisors will utilize MPHD Hiring Practices Manual and its process when hiring new employees.	Human Resources
	Tactic 2: By July 2016, MPHD supervisors will utilize the MPHD Onboarding Manual to engage and develop new employees.	Human Resources
	Tactic 3: By July 2016, create and implement a Performance Evaluation Guide based on best practices that emphasizes honest conversations about employee performance.	Human Resources
	Tactic 4: By July 2016, update practices for promotions and merit increases based on revised Civil Service rules.	Human Resources
	Tactic 5: By July 2017, develop and document a succession planning process for the department.	ELT
	INTERNAL COMMUNICATION	
Obj 1.2	Starting July 2015 and ongoing, 100% of bureau directors will visit all sites and meet with programs and staff quarterly to	Director of
	share and receive information about program operations.	Health/Bureau Directors
Obj 1.3	Starting July 2015 and ongoing, 100% of programs will meet at least monthly to enhance two-way communication to improve	Bureau Directors and
	program and departmental performance.	Program
		Directors/Supervisors
Obj 1.4	By July 2016 and ongoing, each year, 90% of staff will attend a quarterly General Staff Meeting.	Director of Health and ELT
	Tactic 1: Inform staff on departmental issues and to engage staff to share programmatic updates, ideas, concerns and suggestions for improvement.	Director of Health and ELT
	Tactic 2: Solicit employee feedback to help form agenda of the quarterly meetings.	Director of Health and ELT
Obj 1.5	By December 2017, develop and implement an annual employee meeting to recognize staff and discuss the state of the department and public health in Nashville.	Director of Health and ELT
	TRAINING	
Obj 1.6	By December 2015, adopt and implement a Workforce Development Plan for the department that assesses and addresses	Lentz U/Workforce
-	workforce needs, builds leadership capacity, and ensures the timely completion all required Metro and MPHD required trainings.	Development Team
	Tactic 1: Starting in July 2015 and ongoing, implement a Supervisor training series annually.	Lentz U/Workforce
		Development Team
	Tactic 2: By July 2016 and ongoing, ensure all staff receive Public Health 101 and 102 trainings to strengthen the	Lentz U/Workforce
	department's knowledge of the core functions of public health.	Development Team

	Tactic 3: Annually, ensure all mandatory Metro, MPHD and job-specific trainings are offered and completed in a timely	Lentz U/Workforce
	manner.	Development Team
	LEADERSHIP/WORKFORCE MORALE	
Obj 1.7	By July 2016, develop a transparent process for filling MPHD committee vacancies.	Quality of Life-Workplace
		Culture Committee
Obj 1.8	By July 2018, implement at least two recommendations from Workplace Culture Assessment.	ELT
	Tactic 1: By July 2016, and every 3 years at minimum, assess the work environment for employee engagement, morale,	Quality of Life-Workplace
	internal communication and innovation (Workplace Culture Assessment).	Culture Committee
	Tactic 2: By December 2016, utilize assessment to make recommendations to ELT.	Quality of Life-Workplace Culture Committee
		Culture committee

GOAL 2	STRENGTHEN ORGANIZATIONAL PERFORMANCE	RESPONSIBLE PROGRAM/PERSON
	GRANTS	
Obj 2.1	By July 2016, develop a plan for identifying and selecting new grant opportunities.	Office of Grants
		Management
	Tactic 1: Make grant writing workshops available to staff as applicable.	Office of Grants
		Management
Obj 2.2	By July 2016, all grants applications and contracts will use established processes for monitoring and assessing risks of grant	Office of Grants
	opportunities.	Management
Obj 2.3	By July 2017, all active grants and contracts will use established processes for monitoring and evaluation of activities.	Office of Grants
		Management
	Tactic 1: Conduct monthly financial montoring of grant funds and programmatic reviews of grant activities per contract/grant	Office of Grants
	guidance.	Management
Obj 2.4	By July 2016 and ongoing, 100% of grant program managers will receive grant management training.	Office of Grants
		Management
	Tactic 1: Train to educate program managers on Metro government and MPHD grant management processes and policies.	Office of Grants
		Management
	REVENUE	
Obj 2.5	By July 2018, implement a plan to enhance our billing capacity.	Finance and
		Administration
	Tactic 1: By July 2016, develop a plan to enhance our billing capacity.	Finance and
		Administration
Obj 2.6	By July 2016, become an in-network provider to marketplace insurance.	Director's Office
Obj 2.7	By July 2020, establish appropriate partnerships with philanthropic organizations that support public health strategies in	Finance and
	Nashville.	Administration
	Tactic 1: By July 2016, create policies/procedures regarding how organizations interested in being a "friends of" organization	Director of Health and
	of MPHD (as a department or for a specific program) can get involved (subject to appropriate approval by Legal, the Board,	Finance and
	etc.).	Administration
	Tactic 2: By July 2018, facilitate the development of partnerships that provide financial support for public health initiatives.	Director of Health
	TECHNOLOGY	
Obj 2.8	Tactic 1: By December 2016, assess technology needs of staff to identify gaps (equipment, software, and/or trainings) and	Finance & Administrative
-	develop a plan to enhance public health services and administrative technology usage.	Services
	Tactic 2: By July 2016, implement Kronos timekeeping system.	Human Resources

	Tactic 3: By July 2016, develop a plan for SharePoint implementation for the department.	Finance & Administrative Services
	Tactic 4: By July 2017, implement SharePoint as a document management tool.	Finance & Administrative Services
	QUALITY IMPROVEMENT	
Obj 2.9	By December 2015 and ongoing, adopt a departmental QI plan.	QI Team
	Tactic 1: By July 2016 and ongoing, provide QI trainings annually to increase knowledge and capacity of staff to conduct QI activities.	QI Team
	Tactic 2: By July 2016 and ongoing, implement QI projects.	QI Team
	Tactic 3: By July 2016, implement a customer satisfaction initiative for clinics and appropriate programs.	QI Team
	Tactic 4: By July 2016 and ongoing, prepare an annual QI report.	QI Team
-	Beginning in December 2016, develop and disseminate an annual comprehensive report of MPHD's progress toward achieving the strategic plan.	Director's Office

GOAL 3	DEVELOP AND STRENGTHEN COMMUNITY COLLABORATION	RESPONSIBLE PROGRAM/PERSON
	COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)	
Obj 3.1	By December 2015, develop a monitoring and evaluation plan for the current Community Health Improvement Plan (CHIP).	Prevention and Wellness
	Tactic 1: By December 2015, Healthy Nashville Core Indicator Set will be displayed on the Healthy Nashville community portal.	Prevention and Wellness
	Tactic 2: Draft annual report on CHIP progress.	Prevention and Wellness
	Tactic 3: Beginning in December 2017, update Community Health Profile every three years.	Epidemiology
Obj 3.2	By July 2019, convene partners and community members to develop a new Community Health Improvement Plan.	Prevention and Wellness
	COMMUNITY HEALTH ASSESSMENT (CHA)	
Obj 3.3	By July 2018, align community health assessment processes with community partners.	Director of Health and Population Health (Prevention and Wellness, Epi)
	Tactic 1: Establish a committee to identify data gaps.	Director of Health and Population Health (Prevention and Wellness, Epi)
	Tactic 2: Committee to recommend strategies for addressing those gaps	Director of Health and Population Health (Prevention and Wellness, Epi)
	Tactic 3: By July 2018, develop and implement a process for primary data collection to fill data gaps.	Director of Health and Population Health (Prevention and Wellness, Epi)
Obj 3.4	By July 2018, convene partners and community members to complete Community Health Assessment.	Prevention and Wellness
	Tactic 1: By December 2017, conduct a process evaluation of previous CHA and use to inform the development of a work plan.	Prevention and Wellness
	COMMUNITY COLLABORATION	
Obj 3.5	By July 2019, build staff capacity to engage and collaborate with the community.	ELT
	Tactic 1: By July 2018, create succinct Community Collaboration Guide (CCG) for MPHD and train staff.	Prevention and Wellness and Communications Office
	Tactic 2: By December 2018, provide training to staff on methods of community collaboration.	Prevention and Wellness and Communications Office
Obj 3.6	By July 2018, create and implement protocols for improving internal and external data usage and sharing.	Epidemiology
	Tactic 1: By December 2015, identify and catalog data sets.	Epidemiology
	Tactic 2: By July 2017, develop internal and external protocols for data management to address use of common language, confidentiality, storage, sharing and access.	Epidemiology

GOAL 4	ADVANCE HEALTH EQUITY	RESPONSIBLE PROGRAM/PERSON
	HEALTH EQUITY TRAININGS	
Obj 4.1	By July 2018, develop and implement a health equity training plan to deliver to all employees.	Health Equity Team
	Tactic 1: By July 2018, identify and implement training for MPHD leadership regarding public health leadership and health	Health Equity Team
	equity.	
	Tactic 2: By July 2018, identify and implement a health equity training(s) for all MPHD employees.	Health Equity Team
	Tactic 3: By July 2018, annually identify and provide a minimum of one education session using outside speakers/organizations	Health Equity Team
	(e.g. Hispanic Chamber of Commerce, etc.) to talk about health equity issues regarding cultures and populations in Nashville.	
	Tactic 4: By July 2018, host facilitated discussions to develop common understanding of health equity and social determinants	Health Equity Team
	definitions and how they apply to public health work.	
	HEALTH EQUITY AT MPHD	
Obj 4.2	By December 2018, develop and implement health equity plan.	ELT
	Tactic 1: July 2016, establish a department health equity team with a representative from each bureau.	ELT
	Tactic 2: July 2017, health equity team to assess and make recommendations to ELT.	Health Equity Team
	Tactic 3: By July 2018, identify and implement a health equity review tool to assess MPHD policy and programs.	Health Equity Team
	HEALTH EQUITY REPORT	
Obj 4.3	By December 2015 and updated a minimum of every three years, publish a report on health equity and social determinants of health in Nashville.	Epidemiology
	Tactic 1: By July 2017, publish a report on health equity issues of Nashville youth with recommendations for addressing youth equity issues.	Population Health Bureau
	Tactic 2: By 2018, host community listening sessions to learn about community's perceptions of health equity issues and how they can be addressed.	Prevention and Wellness
Obj 4.4	By December 2015, convene community partners to launch the state of health equity and social determinants of health in Nashville report at the 6th annual Healthy Nashville Summit.	Prevention and Wellness
		Prevention and Wellness
	Tactic 2: By December 2015, utilize community presence at Summit to develop a common language for discussing health equity and use to inform educational activities.	Prevention and Wellness
	HEALTH EQUITY IN METRO	
Obj 4.5	By July 2019, incorporate health equity as a component of Health in All Policies (HiAP) efforts, highlighting opportunities for	Health in All Policies
	Metro agencies to consider health equity in their policies and processes.	Team
	Tactic 1: By July 2016, identify an equity impact review tool to describe impacts of proposed policies and programs on historic	Health in All Policies
	patterns of inequity.	Team

Tactic 2: By July 2017, develop a process for testing and fully implementing equity impact review tool.	Health in All Policies
	Team
Tactic 3: By July 2019, advocate to a minimum of five decision making bodies (e.g. Mayor's office, Metro Council, Metro	Health in All Policies
Boards, Metro Departments) use of an equity impact review tool for decision-making. [note: MPHD will identify and	Team
implement health equity impact review tool]	

GOAL 5	EFFECTIVELY COMMUNICATE PUBLIC HEALTH INFORMATION AND THE VALUE OF PUBLIC HEALTH	RESPONSIBLE PROGRAM/PERSON
	BRANDING	
Obj 5.1	By 2016, develop and implement an agency-wide brand strategy.	Communications Office
Obj 5.2	By 2017, integrate the brand framework into internal activities and external communications.	Communications Office
	Internal systems improvement activities include the agency-wide strategic plan, voluntary accreditation, organizational development initiatives, staff trainings, and new employee orientations.	Communications Office
	Internal and external communications include news releases, newsletters, brochures, annual reports, videos, as well as communication platforms (e.g., websites, social media sites, traditional print and broadcast media), and communications plans.	Communications Office
	Tactic 1: Ensure that senior staff have a foundational knowledge base in organizational brand building principles and practices in order to provide strategic leadership in these areas.	Communications Office
	Tactic 2: Educate and engage employees at all levels and empower staff to be effective ambassadors of the MPHD "brand" in the community.	Communications Office
	COMMUNICATIONS TRAININGS	
Obj 5.3	By July 2016 and ongoing, deliver health literacy trainings to increase cultural competence and develop effective public health messages.	Lentz U
Obj 5.4	Beginning in 2017, annually utilize data and mapping tools to demonstrate public health achievements and highlight needs to decision-makers, partners and community.	ELT
	Tactic 1: By December 2017, use as tool for advocacy with elected officials, stakeholders and the community.	Director's Office
	COMMUNICATIONS	
Obj 5.5	By December 2015, establish a communications system to generate information, from all levels of staff, to promote and build awareness and support for MPHD.	Communications Office
	Tactic 1: By December 2015, generate content for MPHD's Annual PR plan editorial calendar by hosting quarterly communication brainstorm sessions (one each quarter) with all levels of staff.	Communications Office
	Tactic 2: EMT and Communications Office will identify 15 participants for each quarterly session.	Communications Office
	Tactic 3: Generate a minimum of 3 story ideas per quarter, complete with 5 Ws, and identified point persons during each brainstorm session.	Communications Office
	Tactic 4: Starting in July 2015, quarterly review and edit MPHD website for accuracy and content.	Bureau Directors/Program Managers
Obj 5.6	By December 2016, establish a three-deep communication process where each MPHD program/division has three people prepared to provide content and present information as a department spokesperson.	Communications Office
	Tactic 1: Bureau Directors and Communications Office identifies three people (Typically, Bureau Director, Division Director, Program Manager, or front line staff) as content providers and department spokesperson.	Communications Office/Bureau Directors
	Tactic 2: Provide media training to those identified as content providers and department spokespersons.	Communications Office