



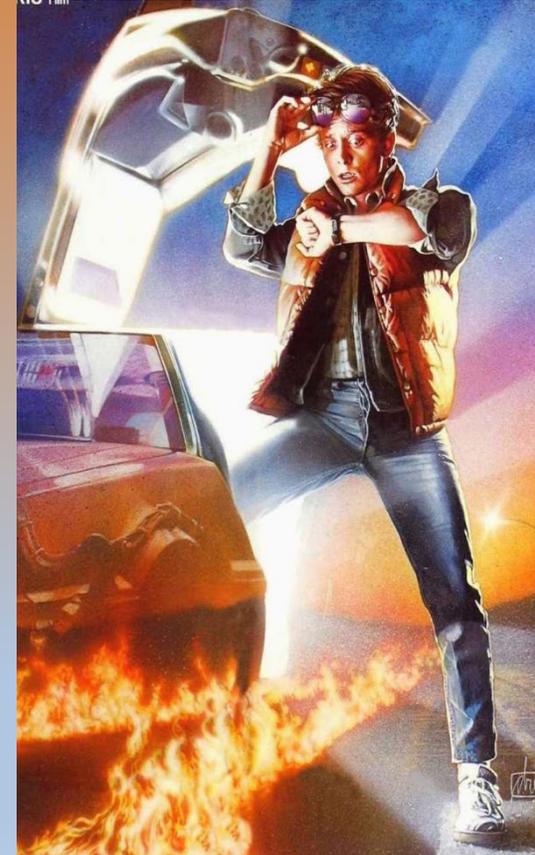
FCPH ALL-STAFF RETREAT
11/02/18

Looking Back....

- Red Letter Dates
- The Future of Franklin County Public Health
 - Proposal 2013
 - Our Future State- 2016
- 2015-2018 Strategic Plan
- 2017 Recap
- 2018 Accomplishments (So far...)

“Red Letter” Dates in Public Health

- **October 24, 1919** - Franklin County Board of Health officially *opened* as a result of the Great Influenza
- **December 1960** - Ohio Legislative Services Commission
- **1988** - The Future of Public Health: the IOM's 1988 report
- **October 13, 1993** - Ohio Public Health Services Study Committee
- **November 2002** - IOM The Future of the Public's Health in the 21st Century
- **June 12, 2012** - AOHC Futures Report: Ohio's Minimum Package of Local Public Health Services
- **October 31, 2012** - ODH Legislative Committee on Futures Report
- **September 20, 2013** - The Future of Franklin County Public Health
- **April 2016** - Public Health 3.0



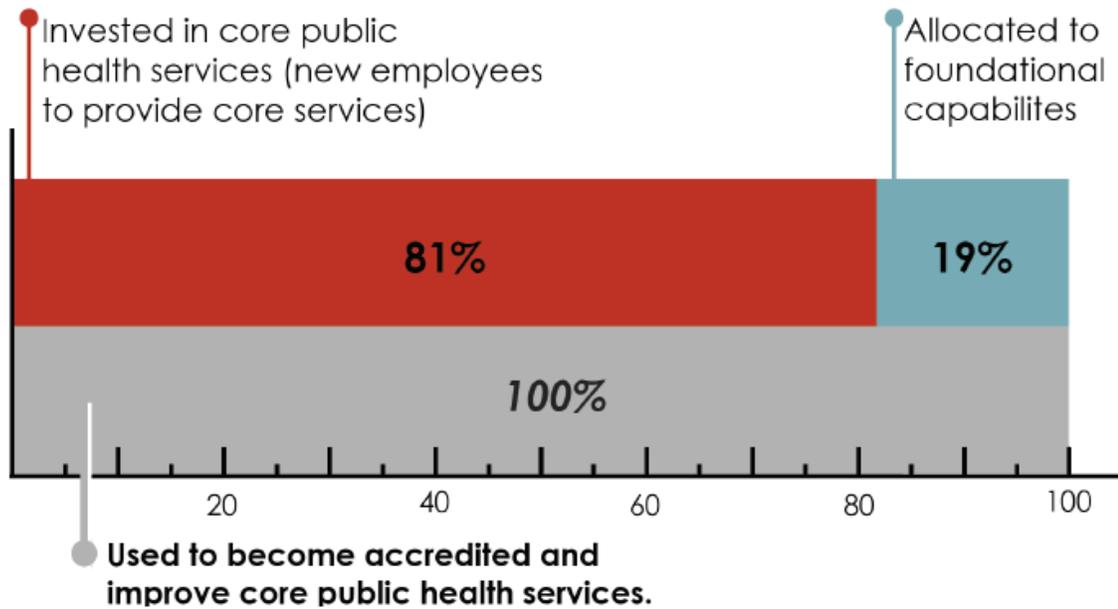
Proposal to Fund Core Public Health Services

- **Sustain Core Public Health Services** - Infectious Disease, CMH, Mosquito Management and Community Environmental Health
- **Build Infrastructure** - Maximize ACA for our residents, especially health promotion and prevention, Resource Development, Information Analysis, and Accreditation

The Future of Franklin County Public Health:

Accredited March 2016
FINAL REPORT November 2016

How is the investment being used?



OUR GOALS → WHAT WE DID

Emergency Preparedness	Hired a Planner and Risk Communication Specialist
Environmental Health	Hired sanitarians to work in public health nuisance and Household Sewage Treatment Systems (HSTS)
Communicable Disease Control	Hired an infectious disease nurse
Health Promotion & Prevention/Community Engagement	Hired a supervisor and health educators
Epidemiology	Hired a Planning & Assessment Epidemiologist
Linking People to Health Services	Hired registered nurses in Immunizations, school health and maternal and child health
Information Management & Analysis	Hired a Director of Health Systems and Planning and contracted with the Franklin County Data Center for IT services
Quality Improvement, Resource Development	Hired an Accreditation Coordinator (workforce development & Performance Improvement)

“Our Future State”

November 2016

- We are rooted in strong community engagement.
- We have strong public health promotion, education and community health nursing to achieve “winnable battles”.
- We have healthy homes and neighborhoods through environmental health.
- We are supported by adequate resources and capabilities that align with community needs and public health science.
- That we all reap the benefits of measurable improvements in health, well-being and prosperity for every community we serve.

2015-2018 Strategic Plan

- **GOAL 1: Promote Health and Prevent Disease** - Continually assess community health status, identify emerging health issues, and together with our communities, work toward improving health
- **GOAL 2: Build Relationships**- Utilize the unique role and strengths of FCPH in our community to build strong partnerships and collaborations to assure optimal public health service delivery
- **GOAL 3: Emphasize a Culture of Continuous Quality Improvement and Customer Service**- Measure, assure and improve quality and effectiveness in all of our
- **GOAL 4: Achieve and Maintain Public Health Accreditation and a Competent Workforce**- Being an accredited health department is our commitment to accountability, efficiency and excellence.



Accomplishments from 2017

- Welcomed three new board members.
- Celebrated two years being accredited
- Implemented an EHR system
- Vaccinated 4,623 residents
- Conducted a mass flu vaccination clinic
- Received opiate grant/Project DAWN
- Engaged in Climate Change efforts
- Investigated two legionella outbreaks
- Awarded CCI grant
- Completed a home-visiting partnership with UWCO
- Conducted FSO satisfaction survey
- Expanded engagement with six CHATs
- Strengthened programs in CEH
- Detected 289 WNV + pools of mosquitoes
- Expanded Plumbing/Med Gas Section
- Provided rabies vaccinations for 1,022
- Enabled 46 homeowners to repair or replace failing HSTS
- Transitioned to a priority based budgeting model
- Created communication materials services and topics.
- Increased number of staff from 77 to 85
- Completed Community Health Assessment

So far in 2018....

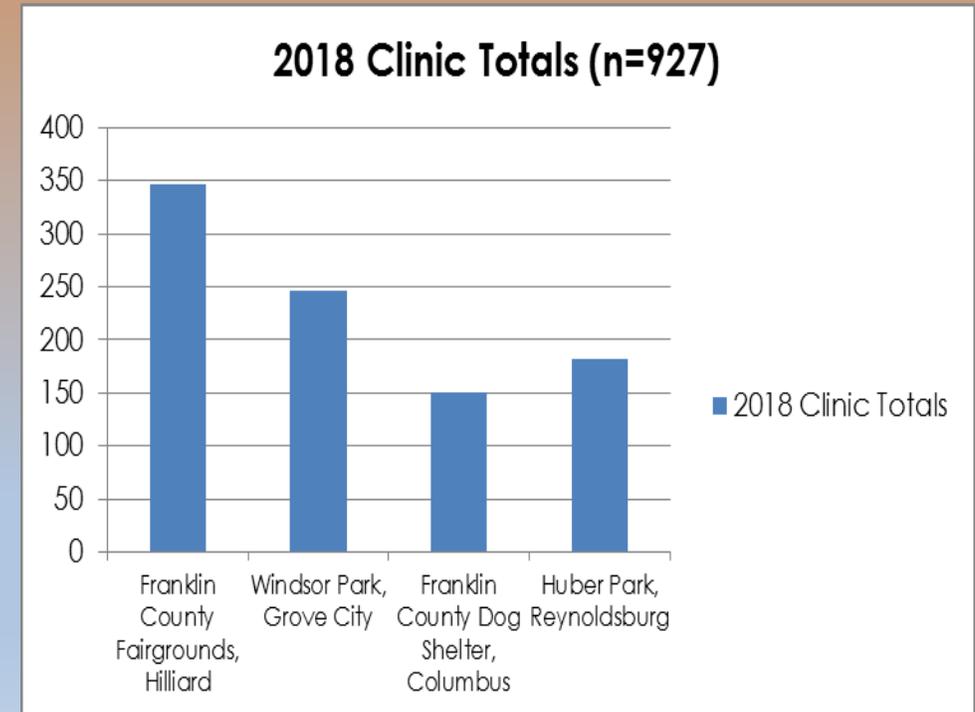
- Mass flu clinic - 447 vaccinated
- Academic partnership Kent State University
- Website & employee portal overhaul and move to a web content management system (11 websites!)
- Extensive social media presence & tons more media coverage
- Updating the Employee Handbook
- Hiring 19 new staff
- Comp and Classification study
- Completed Community Health Improvement Plan
- Nearly 100 materials created and distributed to promote the great programs and services our staff provide
- Created over 500 purchase orders and processed over 1800 invoices representing over \$1,600,000.00 in non-payroll expenditures
- In October of 2018, we went to a paperless cell phone for personal use verification process
- Worked with the Commissioner's office to implement the C-Pass program providing free bus access on COTA buses for all full time staff

Environmental Health

- Jeff Grose and Trevor Risner passed the Certified Pool Operator Course this year, so there are now 4 CPOs in CEH.
- Staff completed 2 inspections at all outdoor pools this summer (a first for this program), doubling the amount required by statute.
- The Healthy Homes Program established a new partnership with the Healthy Homes Program at Nationwide Children's Hospital and their Southside Renaissance project. Franklin County Public Health will play a key role in making sure newly renovated/restored homes involved in this project will be lead safe before they are tuned over to the new residents.
- Held 12 ServSafe Courses with over 300 attendees
- Promoted public health interests on "Dogs on Patio" bill
- Replaced 9 household sewage treatment systems (HSTS), repaired 3 HSTS, and connected 1 residence to sanitary sewer for approximately \$223,000.00 allocated and spent of Water Pollution Control Loan Funds (WPCLF)
- Started inspections for Med Gas in the City of Columbus
- Ryan Wilkins & Mike Gaus have become certified for Med Gas inspections
- Successfully hired Sarah Fink to oversee day-to-day operations and assist with program planning of the vector program.
- Successfully issued a RFP for mosquito management services for

2019-21 and the successful proposer is Clarke Mosquito

- We continue to develop and refine cross training of programs and duties.
- The EH administrative assistant staff is now fully staffed with the hiring of Christina Davidson.- Quite simply, they provide excellent customer service and program support.
- Four successful rabies clinics:



Prevention & Wellness

- NextGen Electronic Health Record successfully implemented for clinical and case management services. Thank you Paula Mieseler and Dennis Curluter for your leadership!
- Became a subcontractor of Columbus Public Health for the Get Vaccinated Ohio Grant that started 7/1/18. New Public Health Nurse (Michael Kieffer) hired to manage grant deliverables.
- 10 Hepatitis A Vaccination Clinics for 657 inmates and staff at Franklin County Correctional Centers since August 17, 2018 to present by Franklin County Public Health in partnership with Columbus Public Health.
- A total of 1432 reportable diseases and 43 infectious disease outbreaks were investigated

Health Systems and Planning

- The Franklin County & Columbus Medical Reserve Corps successfully recruited volunteers for the 2018 Central Ohio Healthcare Preparedness Coalition full scale exercise on April 11, 2018. The exercise created the opportunity to partner around the area of transportation.
- All HSP staff have participated in 2 off-site one-day retreat's which served as an orientation for the numerous new staff having joined the agency over the past year. There were also professional development and team building opportunities at each of the retreats. The outcome lead to the creation of a mission, vision and objectives for Health Systems and Planning.
- The Community Health Action Teams (CHATS) represent a partnership between FCPH and members of local communities whom are passionate about investing their time and effort into improving health and health related outcomes where they live, work and play. In 2018 the number of CHAT teams went from 5 activity teams in 5 local communities to 8 CHATs. These teams follow a pathway approach that provides information on evidence based or best practices to address the SDOH in their community. On December 5, 2018 FCPH will host the first annual CHAT Summit.

To the Future....





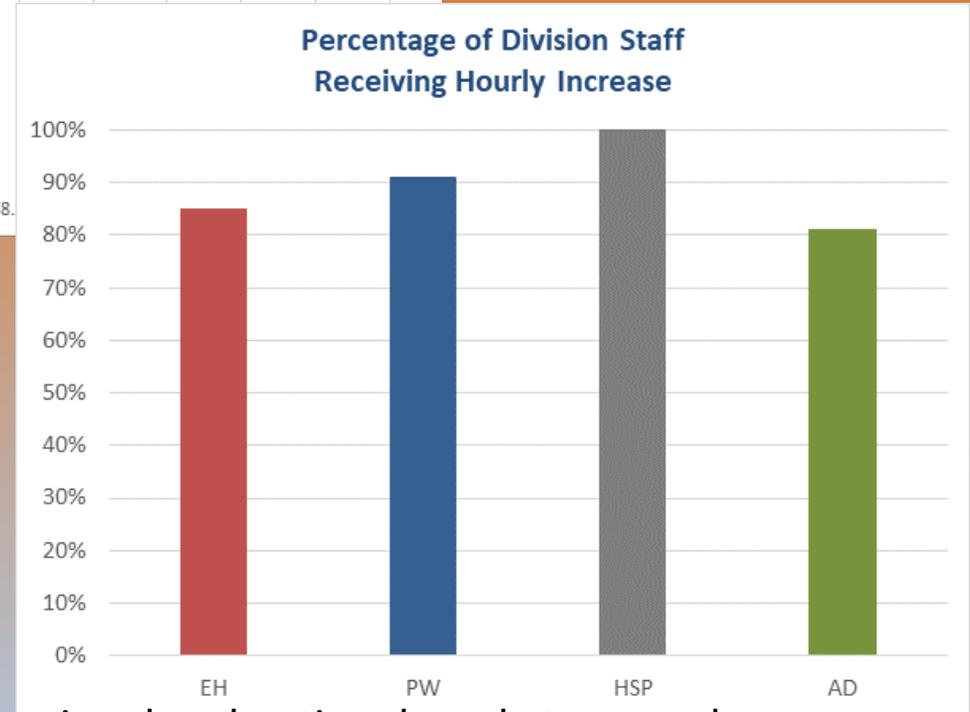
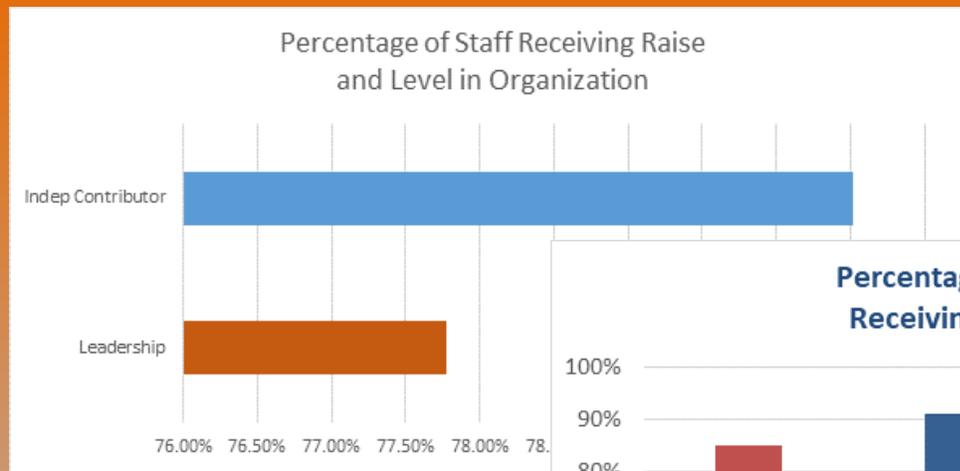
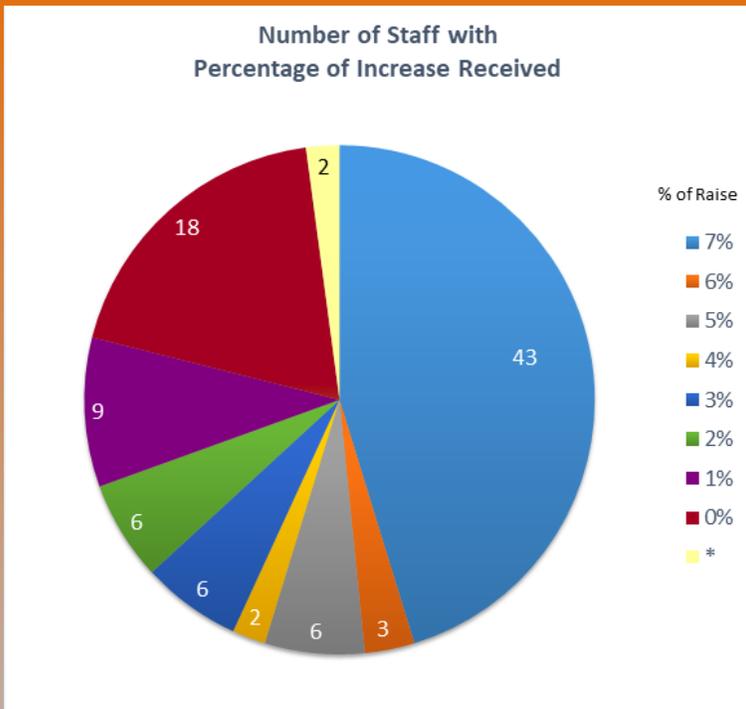
Table of Organization - A final table of organization will be shared with the Board in November. These changes will afford us the opportunity to improve administrative oversight, align program and services and better position the agency for future growth.

- Health Systems and Planning will become its own division - all staff and programs currently in HSP will remain there.
- Environmental Health- two sections will report to division manager.
 - Food Safety and Plumbing (Charlie Broschart)
 - Community Environmental Health and Water Quality (Jeff Gibbs).
- Administration Division- We are renaming the parts of administration as the Office of Communication and Marketing, Office of Human Resources and Customer Service and the Office of Finance and Business Operations

Compensation and Classification Study: Once approved by the Board, we will have new administrative guidance as to pay grades as well as updated job descriptions.

Healthcare Benefits- We are excited to share that the healthcare benefits to employees will remain remarkably the same for 2019 in deductible, copays, prescription tiers, etc. Open enrollment will start November 1 – with more information to come from FCC Benefits.

Strategic Plan



The new pay grades have been objectively evaluated based on local, regional and national market research as appropriate. The new job descriptions will help with consistent expectations and accountability for everyone. All current staff have been evaluated based on their years of experience in their current role and education. Applying this information with the new guidance informs our career “leveling” or placement of staff in the new pay grades. As a result of this exercise some staff will receive a pay increase while others will not, based on the correct placement within their pay grade. Separately, we will be making a recommendation to the Board in December for an across the board raise for all staff. Future raises will be strictly merit-based and outlined in our performance management practices in January.

2019-2021

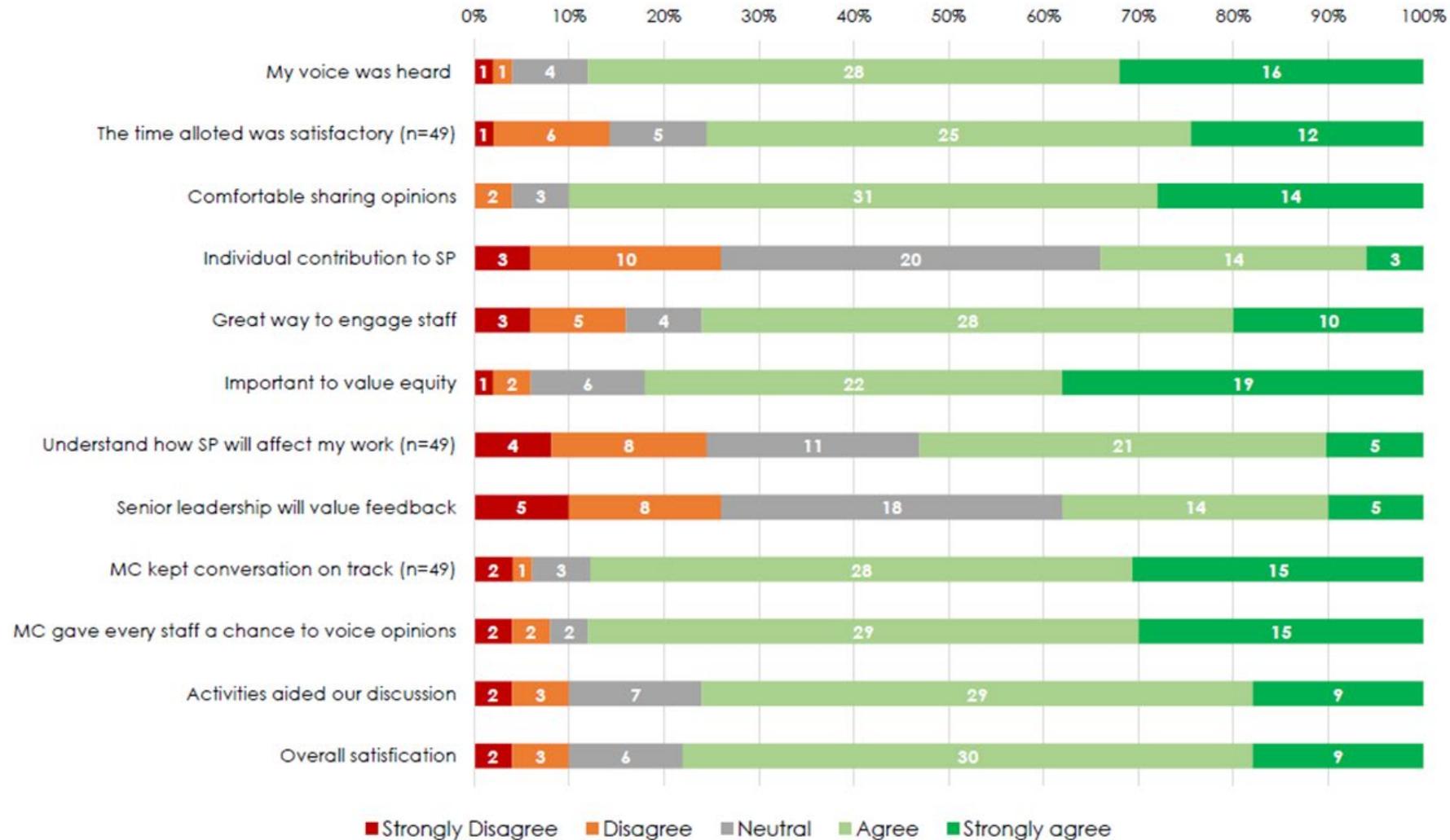
Franklin County Public Health will adopt EQUITY as the foundation for conducting its daily work.

- By December 31, 2019, FCPH will increase its internal and external education and engagement regarding the Social Determinants of Health.
- By December 31, 2020, FCPH will create and implement a coordinated public health information system (CPHIS).
- By December 31, 2020, FCPH will demonstrate equity is incorporated into its internal policies.
- By December 31, 2021, FCPH will increase its available resources through diverse funding streams to support the agency's mission.



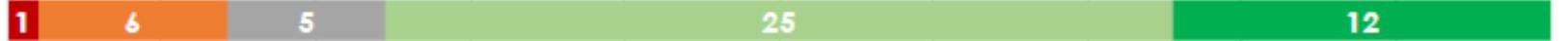
Strategic Planning Café Evaluation (n=50)

Strategic Planning Cafés were conducted in August and September 2018 in order to gain insights and feedback for Franklin County Public Health's new strategic plan. A survey evaluation took place the week after in order to give another chance for staff to voice concerns as well as share feedback on the effectiveness of the Cafés. A total of 50 staff members took the survey. The statements below were asked on a Likert scale and the data labels on the bars represent the number of staff. Comments will also be presented verbatim in this report.



Key: SP=Strategic Plan MC=Mighty Crow

The time allotted was satisfactory (n=49)



Statement 2: The time allotted for the Strategic Planning Cafes was satisfactory

- 1) It was a little long, but everyone powered through it.
- 2) When talking to other staff members, it was made clear that the group I was in was short on time and we did not get to answer the last question that all other cafes got to answer.
- 3) The group felt rushed. The questions were too prescriptive and did not allow staff to provide feedback in open ways. This in no way felt like a safe environment to share our true opinions.**
- 4) 3 hours is a long time. People were losing interest after 2. But for all that was covered it was what was needed.
- 5) Too long. It could have easily been condensed in half the time.
- 6) It took time away from my actual work that has to be done regardless of mandatory trainings.

Individual contribution to SP

3

10

20

14

3

Statement 4: I feel my individual contribution will be a part of our strategic plan

- 1) I doubt the sincerity of "Senior Leadership's" commitment to this.
- 2) Nothing I said will have any impact on this.
- 3) I think I should wait to answer that until after the strategic plan is in effect
- 4) This was mandatory and as history shows, voices are limited to senior staff. We had no input in the objectives. How can we provide input when we feel like our voices are not being heard in the cafe? 5) Do not know yet...
- 6) It feels like senior staff already know what they want in the strategic plan. The way Mighty Crow talks about "massaging the outputs" it seems like they are going to make it what Senior Staff already wants. Not that our opinions will be heard.
- 7) No way. Decisions have already been made. Making us think we're part of any plan is a joke.**
- 8) I'm unsure of how the information will be handled
- 9) There was some negativity in my group because of past experiences. Some individuals stated they have been here a long time and have been involved in a process like this before but never see their involvement come to fruition or be taken seriously.

Great way to engage staff

3

5

4

28

10

Statement 5: The Strategic Planning Cafés were a great way to engage employees for input

- 1) It was nice to have some sort of input.
- 2) Employees are overworked and this seems like a creative way to get them to figure out how to do even more.
- 3) We didn't have much chance to talk about the things that we're dealing with now (our daily issues) and how to fix those issues instead of worrying about things 5 years**
- 5) The optics are that senior staff can't engage directly with "junior staff".
- 6) Not necessarily. I think people held back because they knew everything they said would be reported to senior staff.
- 7) The input that staff gave was interesting and insightful. This input however, will be glanced at and Senior Staff will go ahead with whatever they want, which I'm sure is probably already decided.
- 8) Agreed - although it would have been more effective without supervisors present

Important to value equity

1

2

6

22

19

Statement 6: I understand why it is important for FCPH to value equity in all of our work.

- 1) It is rather insulting to suggest that FCPH doesn't already value equity in the first place.
- 2) This is a hard sell to me personally and will more of a hard sell to the public. People worry about themselves and don't usually care about what others are doing or what's happening in that person's neighborhood vs. their own.
- 3) Not practical in some aspects of our work
- 4) Everyone should be treated fairly. This is something that we are doing, or should have been doing for the entire longevity of the health department. It should have already been incorporated into our core values. Why is this an issue now? Have we not been treating people with equity?
- 5) Important, yes? Practical, No.
- 6) Work equity has been discussed for years. Nothing will change. Do your job, don't do your job...you get paid either way.
- 7) Yes, both internally and externally.
- 8) **I understand it but I am not sure what else is being done to achieve this.**

Understand how SP will affect my work (n=49)

4

8

11

21

5

Statement 7: I understand how the Strategic Plan will affect my work

1) It's going to add to our workload

2) Will create a lot more work for most and that's not a good thing because I can't keep up with what I do now. Need more staff to handle these things!

3) We have not been adequately taught about determinants of health, and the people who do this every day are out of touch with reality.

4) Do the authors of the Strategic plan understand how our work is already equitable?

5) No, I don't understand. Certain programs have to follow rules and regulations set by governing bodies outside of this organization. And that work has to go on regardless. Please understand this issue.

6) I do not understand how it will affect my job specifically

7) Somewhat - will gain clarity when the plan is released.

Senior leadership will value feedback

5

8

18

14

5

Statement 8: I believe that senior leadership will value my feedback

- 1) Haven't shown much resolve in this area so far.
- 2) Newer leadership doesn't value it now. We are overworked and overwhelmed and no one cares. Stop micromanaging us. It doesn't show that you value us or trust us.
- 3) I think senior staff will value our feedback but doesn't mean anything will be done about it or you may end up doing what you want anyways.
- 4) I hope that the feedback discussed will create action steps to improve the agency (as a whole) moving forward.
- 5) I think the strategic planning cafe is a strong sign that senior leadership will value employee feedback**
- 6) The cafe felt rushed. No overview was given until it was asked by several FCPH attendees. It was our people who gave us background information, and who helped us understand how the process got to this point.
- 7) Hope so; otherwise the cafe was wasted time and energy.
- 8) To be determined.
- 9) Senior leadership will do what they want, as always with no opinion from the staff. Normal work still has to continue. How do you not understand this?**
- 10) I have strong hopes that they will, but I am skeptical, since much of the information has been previously shared and not acknowledged

Activities aided our discussion

2

3

7

29

9

Statement 11: The activities in the Strategic Planning Cafés effectively aided our discussion

- 1) Some questions didn't make sense
- 2) I did not like how fast we had to come up with 4 or 5 answers
- 3) The facilitator was condescending, rude, and unprofessional. She created and contributor to the poor environment in this cafe.
- 4) I would not describe what we did as "activities"
- 5) The questions that we were asked to answer seemed irrelevant to what we do daily.**
- 6) Again, Molly did not clearly explain the activities and she became frustrated with the group. At one point when asked to list FCPH strengths, someone commented about discussing weaknesses. Molly stated this was not the place for that. What??!!
- 7) At times it would have been good to have a larger discussion then the quick questions sessions.
- 8) We focused mainly on strengths

Overall satisfaction

2

3

6

30

9

Statement 12: Overall, the Strategic Planning Cafés were a good way to engage staff and get feedback

- 1) Now let's see what actually happens with the feedback other than for *Mighty Crow* to make a report and then everyone pat themselves on the back.
- 2) I am not interested in doing it again.
- 3) I felt not only was it a planning meeting but also a way to meet and bond with others we may not always have a chance to interact with.
- 4) Overall, I think it was a useful way to engage the FCPH staff about what they see as positive and negative within the FCPH Department and to let the senior staff know about the problems which are possible causes of high turnover rates, low morale, etc. So, thank you very much for caring about what the staff think and trying to correct some of the prevalent issues within FCPH.
- 5) Perhaps facilitators who came in with open minds, and were not condescending would have been better.

Additional Comments & Feedback

Will I be heard?

- I hope employees valuable time used will not be in vain.
- Thank you again to the Health Commissioner and all the staff who formed and implemented the idea to do this strategic planning cafe. It shows that you want to hear how employees experience working at FCPH and that you want to improve FCPH as a whole. It is very admirable of all of you and profoundly appreciated as an employee.
- Unfortunately, **there is little confidence from the staff that their opinions will be heard and incorporated into the strategic plan.** Because senior staff has already created goals and has ideas on what they want to see, general staff are not convinced our opinions matter. It felt like Mighty Crow was just going to take our opinions and "massage them" into what senior staff wants.

Process:

- Cafe went well, Gretchen did a great job of keeping everyone on track, explaining the process, and encouraging staff participation.
- I think it will help morale also that senior staff wanted to hear thoughts and opinions from the front line staff, supervisors and division managers.
- It was maybe not the most beneficial to make it mandatory. This isn't everybody's interest.
- Please do not ever make us do this type of thing again. Overall, it was awful.
- Really liked the small group settings to discuss across different divisions.
- **Unsure why staff wasn't involved with aiding in a strategic planning goal. Equity was chosen for us rather than including us in coming to that decision.**

Additional Comments & Feedback

Change:

- Too many changes at once with more coming leaving employees overwhelmed and overworked. So much for work and life balance. Newer leadership is too eager to change everything and spend money including things that don't need changed or restructured as if we did a horrible job before.
We did a good job before like getting accredited.

Accountability:

- I think if supervisors were not present, more honest feedback would have been shared. There are quite a few things going on from a staff level experience that senior leadership does not know about, and information can't be shared for fear of retaliation from supervisors. Because of this, I think that evaluating from staff level up to leadership would be effective in holding leadership accountable - just as staff is evaluated by supervisors. Once these challenges are addressed, I believe there will be greater results with the strategic planning efforts and greater morale overall.
- **The Board's decision to choose this theme for the strategic plan indicates that an awareness of what we already accomplish as an agency on a day to day basis is not being properly communicated.**

Social Determinants of Health:

- It is also really hard to identify how to incorporate social determinates of health with the regulatory side/what the ORC states we have to follow. No one could help answer that question.
- **It was clear in our all staff meeting that senior staff members struggled to give thoughtful responses to how the strategic plan affects our day to day operation.**

Objective 1: By December 31, 2019, FCPH will increase its internal and external education and engagement regarding the Social Determinants of Health*.

Strategies based on themes that emerged from café questions:

1. FCPH will develop section-level administrative guidance related to social determinants of health
2. FCPH will examine how and communicate with each village, township and city in its jurisdiction impact of social determinates of health
3. FCPH will develop governance structure for a “health in all policies approach” through Health Works Franklin County

What are our strengths regarding education and engagement on the social determinants ?

- Hardworking, **knowledgeable staff**
- Up-to-date, diverse communications with the public
- People starting to think of SDOHs
- Engaging leadership
- FCPH has a diverse range of experts with knowledge and experience.
- Good communication with the public, great social media and marketing.
- A passionate staff, encouraging and helpful.
- Good communication with **communities** and clients.
- Effective programs and response to Public Health concerns.
- Inter-departmental communication with all staff meetings.
- Presence on **social media** channels.
- Positive **relationships** with community organizations.
- Written communication about FCPH program flyers, etc.

How can we increase education and engagement for the Social Determinants of Health?

- Utilize existing staff/knowledge
- Add education to existing interactions
- Decrease language barriers
- **Use existing partners, communication team and social media for outreach**
- Use data to provide direction
- Increase staff morale to increase community engagement
- Trainings: increased internal education/ cross-training for staff, new certifications, offer trainings to the community and other entities.
- More community engagement through social media, service announcements, etc.
- Promote more group cohesion: retreats, team building activities, etc.
- Increased outreach and education through: big events, communication materials (online and physical), updating website, etc.
- **Finding ways to have a greater engagement and face in communities.**
- Be culturally and diversity competent, treat each communities' individual needs.
- **More staff education about what other FCPH programs are doing.**
- **More education in the community about what FCPH provides (services).**

Objective 2: By December 31, 2020, FCPH will create and implement a coordinated public health information system.

Strategies based on themes that emerged from café sessions:

1. Invest in training, hardware and software needs as outlined in its most recent information technology assessment.
2. Increase its capabilities to identify, collect, analyze, store and share data internally and externally in real time
3. Translate the health implications of identified trends and “hot spots.”

What resources do we need to become data-driven?

- Accessible and knowledgeable IT staff; more IT staff
- Updated and consistent technology (software and hardware)
- Commitment, follow-through
- Access to outside data
- Staff training in IT/ data analysis and interpretation.
- **Improved technology (more modern hardware/software and systems communicating with each other).**
- Hire/ train staff to operate/ interpret data/database.
- More equipment for staff: laptops, tablets, etc.
- Money/funding – for staff, for equipment, software, etc.
- Training on using existing systems and new systems.

What would a data driven organization at FCPH look like?

- Collect quality data
- Use data to inform decisions and policy
- Use data to help the communities we serve
- **More people, more staff collecting data**
- Provide feedback on our strengths, weaknesses; be transparent in our data
- May need to increase resources or decrease resources
- Obtain more funding for technology; enhance sustainability
- **Data would be accessible**
- Culture shift from paper to electronic
- We would be more streamlined and have a **data dashboard**.
- There would be a shift from “the way we have always done things” to a **more efficient system**
- Capitalize on internal resources, as there are people here with wisdom
- Understanding of every department and how they collect information

How do we become a data driven organization?

Have appropriate technology

Define what is meaningful

Use data for baselines, goals and policies

Use data consistently/ be consistent with data

Train more staff/hire more staff to analyze/interpret data and maintain a database.

To have better technology (hardware and software), technology that can communicate between systems and departments.

To have better equipment for all staff. Consistent hardware/software in all departments.

A decrease in paperwork and an increase in digital/online.

Updated technology systems (hardware, software, etc.).

Better data organization and accessibility.

Communication between programs and a universally accepted idea of what “story” is being told.

More staff with expertise in data collection/analysis and each department having access to a staff person with expertise.

Technology improvements – hardware/software upgrades, compatible systems.

Staff training/incentives for staff, help reduce reliance on paper.

More space, more efficiencies, more focus on QA/Q1.

Objective 3: By December 31, 2020, FCPH will demonstrate equity is incorporated into its internal policies.

Strategies based on themes that emerged from café sessions:

1. FCPH will engage its internal committees to review existing and create new policies as appropriate.
2. FCPH will provide additional staff training about equity, cultural competency and diversity related to its programs and communities.
3. FCPH will implement new compensation administrative guidelines.

How can you bring equity into the work you do?

- Establish equity **committee**
- Education and training
- Enforce new rules uniformly
- Reasonable expectations per facility
- Make partner services and translating more available
- Have internal committees with a diverse group of employees (different departments).
- **Sharing information and policies/ involvement among department: Meetings, surveys, committees, anonymous suggestion box, etc.**
- Quality staff benefits: option to work from home, good health insurance, etc.
- Have everyone on the same page. The same idea of equity, the same understanding of policy, understanding of diversity among staff.
- A desire for a sense of transparency and fairness within agency.
- To have an understanding of the diverse communities FCPH serves.
- Work-life balance in policies (working from home, staff leave, empathy)
- Refer community members to other FCPH programs that may help them (carry “hot cards” to hand out).
- Sliding fee scale for services
- **Staff education (cultural diversity, knowledge of agency as a whole)**

What will it look like to incorporate Equity into all policies?

- Low turnover, happy staff
- Policies made with a sense of the whole
- **Staff understanding of equity**
- Flexible schedules and the ability to work from home
- Accumulation of time
- **Looking at compensation and benefits**
- The option to work from home.
- Health incentives: wellness/fitness opportunities, biking/travel incentives, etc.
- A greater expression of empathy and understanding from staff/management.
- **The option to cross-department train.**
- It would look like more transparency and accountability.
- An improved quality of life for employees which in turn would show a lower turnover rate.
- Happier employees.
- **Compensation/raises/retention.**
- Improvement with morale and communication.
- **Increased staff awareness of FCPH services as well as other community resources.**
- **Explore ways to review policies and practices internally to ensure equity.**
- Looking at how busy/understaffed some divisions might be versus others.

Objective 4: By December 31, 2021, FCPH will increase its available resources through diverse funding streams to support the agency's mission.

Strategies based on themes that emerged from café sessions:

1. FCPH will dedicate resources to identify and apply for grant funding.
2. FCPH will re-evaluate its current fee structure and contracts to ensure they are both equitable and competitively priced.
3. FCPH will explore non-traditional funding sources, including corporate sponsorships, fundraisers, not-for-profit development levies and/or taxes.

How can we access non-traditional resources?

- **Dedicate staff to search/acquire funding**
- Research non-traditional grants, new legal mechanisms
- Ask for money
- Focus on FCPH foundation
- **Evaluate current fees/contracts**
- Charge additional fees for additional services
- Look at partnerships, policy changes
- Hire fundraising staff.
- Increase outreach, marketing, publicity, and be visible to the community.
- **Acquire corporate partnerships/sponsorships.**
- Hire specialist staff (fundraising, sales, corporate outreach etc.).
- Board engagement/ engagement in acquiring funding and sponsors.
- Create an outreach strategy/ identify prospects.
- Having a dedicated staff person to reach out to schools (interns) and for volunteers.
- Someone dedicated to fund-raising and grants/partnerships/sponsors.
- Transparency/promotion/press-release (letting people know what is needed).

What are some non-traditional funding sources?

- **Levies/ taxes, fines/fees**
- **Donations/endowments/crowd-funding**
- **Investors/Partnerships**
- Festival/fair
- Charge for trainings
- Incentivize donations
- Prioritize current and potential funding streams
- Unique grants.
- Sponsorships/partnerships
- **Higher fees**
- Fundraisers: health fair, calendars, marathons, games, etc.
- Sell trainings to outside entities.
- Corporate sponsorships/donations/outreach and strategic partnerships with businesses
- Fundraising events: 5k, auctions, etc.
- Offer trainings to the community and other entities.
- **Grants**
- Levy
- Other grants (beyond ODH funds)
- Foundations/donations
- Corporate sponsorships/partnerships
- Review expenses
- Utilization of students and other volunteers
- University partnerships
- Ball/Gala event
- Have an open house and get the community familiar with our work
- More networking

Where do we go next?

- Internal Committees
 - Section Level Guidance – Work Plans
 - Performance Management System
 - Quality Improvement
 - Re-Accreditation
 - Meetings and Communication
- Next Retreat:
 - January 31, 2019
 - 8:30 – 11:30 AM

