

**North Dakota Public Health Association
Strategic Planning
May 2, 2008**

Summary Report

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First District Health Unit
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The North Dakota Public Health Association (NDPHA) convened a strategic planning session with board members, staff and key partners on May 2, 2008 to plan for the next three years. The agenda is included as Appendix A. All the invitees were sent pre-work packets to gather input on their ideas for the vision, mission, values and strategic priorities for the Association. In addition, they were asked to complete a list of key stakeholders; organizational mandates; and strength, weaknesses, opportunities and threats (SWOT) of the Association. (Appendix B). The facilitator compiled this information into lists broken out by the key areas the group would discuss during the session. The pre-work summary is included as Appendix C. The facilitator also compiled samples of vision, mission and value statements from other state public health organizations for the group to use as references while thinking about their organization's guiding vision, mission and values. In addition, the group referenced copies of the grant work plan from the American Public Health Association, so their organizational work plan would complement the APHA grant (Appendix D and E).

Eleven of the fourteen (79%) of the individuals invited participated in the session and seventy-nine percent (79%) submitted pre-work packets. Those who could not attend were asked to provide input by completing the pre-work (Appendix B). Participants included: Karen Volk, Sue Brandvold, Theresa Knox, Debbie Swanson, Nancy Bryn, Danell Eklund, Maureen Roden, Lois Mackey, Theresa Will, Mary Gattis and Kelly Nagel (via interactive video network). Kathy Mangskau facilitated the session and outlined the objectives for the day (Appendix F). The facilitation slides are included as Appendix G.

The strategic planning session opened with an ice-breaker on individuals' preferences when approaching change. Each completed a change style indicator and shared if they had conserver, pragmatist or originator tendencies. As background for the planning, the group identified NDPHA's key internal and external stakeholders and organizational mandates. The group then outlined their vision, mission, and values. A review of NDPHA's strengths, weaknesses, opportunities and threats (SWOT) led to the identification of the organization's resources and key issues, goals and year-one objectives. Appendix C shows the groups' priorities as they narrowed each of the areas to identify future directions for the next three years. The highlighted items were voted as the top priorities. These lists guided the development of the organization's goals and objectives and their logic model.

Participants outlined plans for follow-up. Committees will be activated to carry out the plans. June 9, 2008 was set as the date to finish the year one work plan.

An evaluation of the session indicated that all participants agreed (89% strongly agreed, 11% agreed) that the retreat met the stated objectives for the day. Almost all (89%) stated they would like to see an annual strategic planning session held. A copy of the session evaluation summary is included as Appendix H.

Key Internal Stakeholders

- Governing council
- Sections of membership
- NDPHA membership
- Committees
- Executive director
- Tobacco division of state health department*
- Injury prevention division of state health department*
- Emergency preparedness*

*Programs that generate revenue for NDPHA through conferences or special projects.

Key External Stakeholders

- Local health departments
- State health department
- Senior management at state health department
- Local and state policy makers
- Governor's office
- Healthy North Dakota
- Rural Health Association
- Academia
- Community members/general public
- Public health clients
- Private funders
- North Dakota Public Health Foundation

Organizational Mandates

Constitution and Bylaws

- Protect and promote personal, public and environmental health
- Bring together persons interested in public health for the purpose of fostering a better understanding of public health problems and practices and to facilitate the interchange of ideas relating to methods for solutions of these problems and for assaying the value of public health practices in the state
- Provide for scientific advancement of members
- Aid in the promotion of state and local legislation in the interest of public health with particular focus on the interrelationship between health and quality of life
- Serve the health of the public
- To provide a base for promoting public's health, provide for research-based interventions and support exchange of ideas
- Establish duties of each officer and section chair
- Hold an annual meeting
- Elect officers at the annual meeting
- Maintain an official publication (Public Health News)
- Maintain standing committees

- Collect dues
- File an annual report with the Secretary of State
- File an annual tax return/non-profit reports
- Hold 4 governing council meetings per year
- Maintain membership
- Non-profit

Grants

- Promote Get Ready Campaign
- Strategic Planning
- Establish a communications process
- Create and manage membership database system
- Establish/maintain dedicated office space and equipment
- Develop a business plan
- Add new membership benefit
- Participate in training on membership recruitment and retention, governance issues
- Elect a representative to ARGC
- Serve as fiscal agent for meetings and conferences
- Sponsor succession planning for officers
- Sponsor public health day at ND Legislature
- Sponsor APHA/public health leader to speak at DCRPH
- Submit grant applications
- Grant reporting requirements
- Public health day at the Legislature

Other

- Be good stewards of dollars
- Lobbying requirements

SWOT ANALYSIS

Strengths (Internal)	Weaknesses (Internal)
<ul style="list-style-type: none"> • Capacity building grant • APHA • Good networks established • Good internal communication • Strong, involved, experienced and diverse leadership • Strong governing council • The expertise of people directly involved with the organization • Good representation of areas affected by public health (nursing, tobacco, environmental health, emergency management) • Executive director that can be the communication link with the health units involved • Good resources for up to date information on pandemic flu preparedness information the public needs to know • Part-time executive director • Current website • Continuity provided by paid staff 	<ul style="list-style-type: none"> • Low membership • Many uninvolved members • Membership continuity • New members of the public health workforce don't know or see the benefit of being a member of NDPHA • Time constraints for each person involved. (so much to do and so little time) • Staff time limited, part-time executive director, paid staff may need to be full time • Limited budget • Communication at times • Low attendance at annual meetings • Small committees • Working relationship with the state health department • No orientation for new board members • Low visibility
Opportunities (External)	Threats/Barriers (External)
<ul style="list-style-type: none"> • Enticing more community people to join and be involved in NDPHA. Many other agencies and organizations would have a lot to offer us • Work with tribes to a greater extent • The new grant/capacity building initiative • APHA • Public health accreditation • Building on coalitions with other agencies that can work with us in times of need. • Public health foundation • Strengthen membership through education and Rural and Public Health Conference • Advocacy for public health workforce 	<ul style="list-style-type: none"> • Lack of knowledge regarding NDPHA • Too few dollars/lack of funding • Lack of meeting time due to distance to travel • Public health is not always viewed as necessary • Public health association sections breaking away and starting their own associations (i.e., nutrition, environmental health) • Capacity building initiative • Membership is not engaged between annual meetings

Vision

NDPHA is the leading professional organization recognized as the voice for public health.

Mission

The mission of NDPHA is to improve, promote and protect health for residents of North Dakota through leadership in policy, partnerships and best practices.

Values

We value:

**Collaboration
Professionalism
Integrity
Social Justice
Diversity
Respect
Flexibility
Empowerment**

Goals

**Strengthen membership.
Enhance communication.
Engage membership in policy advocacy.**

Strategic Priorities

**Membership
Policy/Advocacy
Communication
APHA Grant**

Good Ideas

**Provide education to membership on the difference between lobbying and education.
Define what you can do as a member of NDPHA versus an employee of an organization with lobbying restrictions.
Add code of ethics.
Add non-discrimination language to constitution and contracts.
Provide leadership development (accreditation and PH leadership training).**

Logic Model



