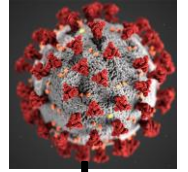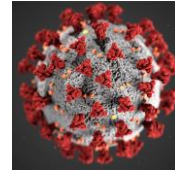# Strategic Plan Updates: 2011-2021 Closeout and 2023 Progress Report

Presented by Siri Kushner, Assistant Community Health Director
Kitsap Public Health Board
March 7, 2023

KITSAP PUBLIC HEALTH DISTRICT

2011-2021 Strategic Plan Closeout

- KPHD's most recent 10-year strategic plan was created and approved by the Board in 2011

- In 2016, that plan was updated, and board approved

- Activities delayed by COVID:

  - No bandwidth to carry out many of the elements of the plan

  - Unfinished systems to assess progress

  - No time to develop a new strategic plan

- 2022 we continued under the same strategic plan
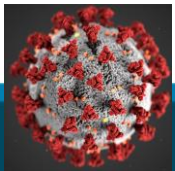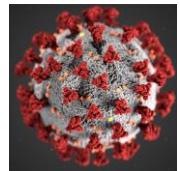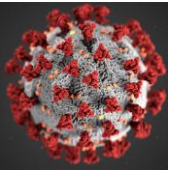
Amended 2011-2021 STRATEGIC PLAN

Approved by Kitsap Public Health Board on January 5, 2016

Initiative 1	We will decrease communicable diseases and their impacts in our community.
Goals:	o Enhance tracking and analysis to decrease significant communicable disease threats. o Assess and increase immunization rates.

Initiative 2	We will decrease chronic diseases and their impacts in our community.
Goals:	o Enhance partnerships to prevent chronic disease. o Strengthen systems to increase chronic disease data gathering, sharing and evaluation. o Promote access and linkage to preventative care across all ages.

Initiative 3	We will protect the public from contaminated water, food, land, and air, and insanitary environments.
Goals:	o Prevent and reduce the public's exposure to unhealthy and unsafe environments. o Develop and implement key policy and enforcement interventions.

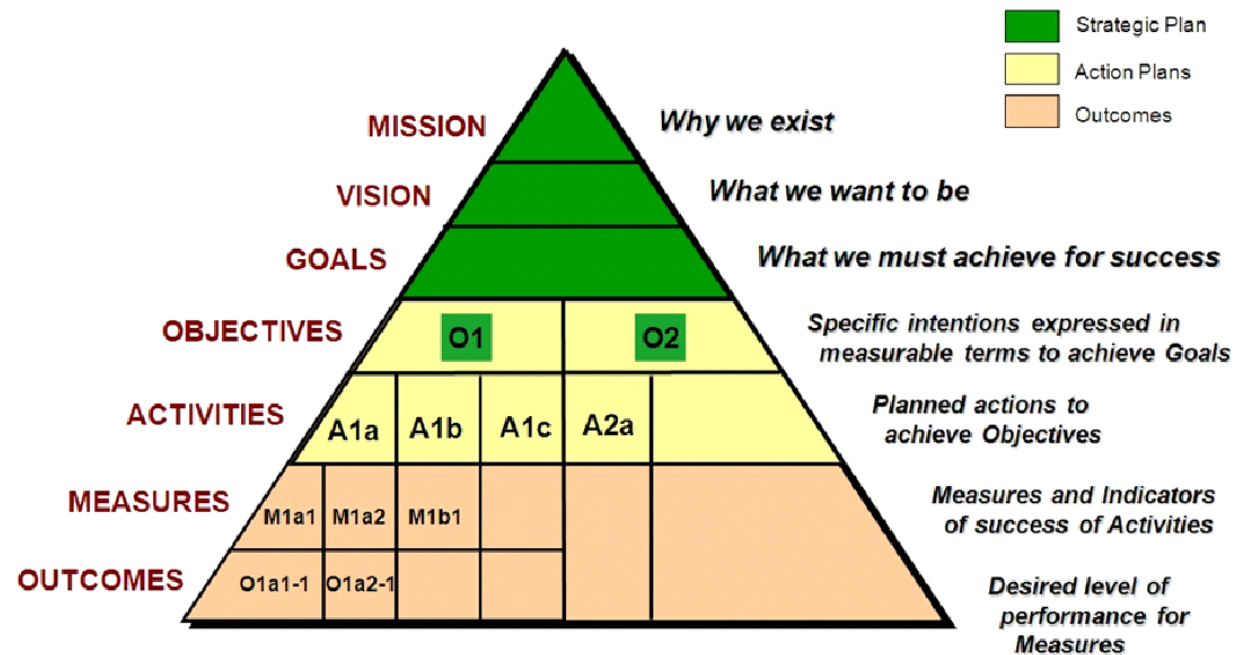| Initiative 4	We will promote healthy child development and health equity by ensuring all children have healthy starts.
Goals:	o Increase evidence-based prenatal and early childhood interventions. o Build capacity to assess poor birth outcomes. o Increase access and linkage to pre-conceptual, inter-conceptual and prenatal care.

Initiative 5	We will strengthen our ability to provide the Foundational Public Health Services.
Goals:	o Strengthen our capacity to do assessment, surveillance, and epidemiologic work. o Strengthen our capacity for public health emergency preparedness and response. o Strengthen our capacity for internal and external public health communication. o Enhance our ability to develop and implement strategic Public Health policies. o Increase capacity to implement effective business practices and ensure agency sustainability and accountability. o Ensure capability to provide Foundational Public Health Programs.

Initiative 6	We will support statewide and regional efforts to address the Triple Aim of health system reform.
Goals:	o Support regional efforts to establish a collective impact process to improve population health across the region. o Participate as a public health stakeholder to accomplish performance-based projects that improve population health.

We do Strategic Planning to…

- Set a proactive (not reactive) path to guide organizational decision making for the future

- High-level strategic direction (green) provides purpose for planning

Strategic Plan Major Components

🟩	Strategic Plan
🟨	Action Plans
🟧	Outcomes

MISSION — Why we exist

VISION — What we want to be

GOALS — What we must achieve for success

OBJECTIVES (O1, O2) — Specific intentions expressed in measurable terms to achieve Goals

ACTIVITIES (A1a, A1b, A1c, A2a) — Planned actions to achieve Objectives

MEASURES (M1a1, M1a2, M1b1) — Measures and Indicators of success of Activities

OUTCOMES (O1a1-1, O1a2-1) — Desired level of performance for Measures

Assessment of our progress in 2021 and 2022

- Subject matter experts at KPHD conducted a two-part assessment

  - Part 1: rating on a scale of 0 to 3 for each goal within each initiative
    - 0 = not started
    - 1 = planning
    - 2 = implementing
    - 3 = completed
    - Blank = not applicable

  - Part 2: narrative examples of progress

2021 Annual status assessment of progress by Strategic Initiative.						
Initiative:	1	2	3	4	5	6
Average status:	0.0	0.9	1.6	0.8	1.3	3.0

2022 Annual status assessment of progress by Strategic Initiative.						
Initiative:	1	2	3	4	5	6
Average status:	1.2	2.0	1.8	1.6	1.9	3.0

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Assessment of our progress – examples for 2022

Initiative 1

Decrease communicable diseases and their impacts in our community.

Dedicated and embedded Communicable Disease Epidemiologist

Initiative 2

Decrease chronic diseases and their impacts in our community.

Sustained partnerships in Healthy Eating/Active Living (HEAL) coalition, Kitsap Moves, new Injury Prevention program

Initiative 3

Protect the public from contaminated water, food, land, air and insanitary environments.

Ongoing implementation of policy and enforcement interventions - vapor product ordinance, school safety inspections, drinking water ordinance

Initiative 4

Promote healthy child development and health equity by ensuring all children have healthy starts.

Ongoing implementation of Nurse Family Partnership (NFP), expansion to serve 12 additional families/year

Initiative 5

Strengthen our ability to provide the Foundational Public Health Services.

Strengthened capacity for assessment, emergency preparedness, communications and performance and quality; invested Foundational Public Health Services funds across KPHD

Initiative 6

Support statewide and regional efforts to address the Triple Aim of health system reform.

Participation in regional Olympic Community of Health Action Groups and funded for "Connect to Vax" project

… moving ahead to 2023

New Strategic Plan Process

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2023 Strategic Planning Timeline

Stakeholder/Community Input
CHNA/CHA community leader interviews Oct-Nov
KPHB and employee surveys Nov
KPHD employees + VillageReach

Strategy Review/Development
early January– February
meet Jan x 1 long, and Feb x2 (1 long)
Strategic Planning Workgroup

Action Plans
March – April
KPHD employees + VillageReach

Board Approval

Activity/ Strategy input
March
Community leaders interviewed + KPHD employees

Dissemination

Monitor
June- December
KPHD employees + VillageReach

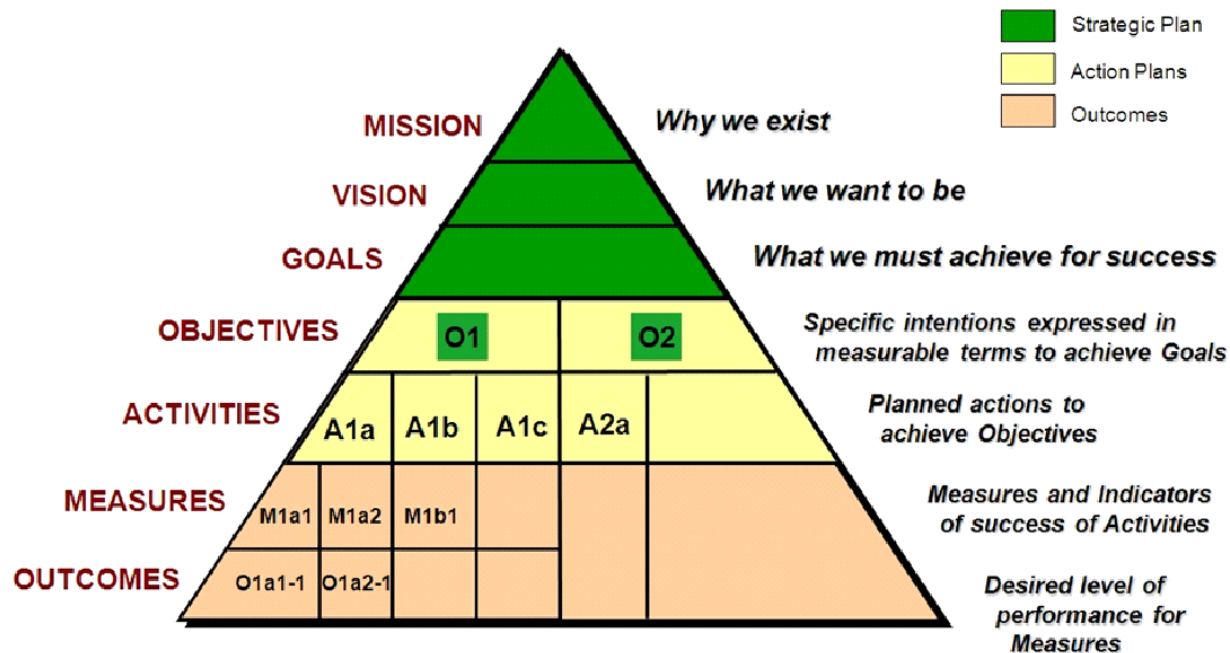October | November | December | January | February | March | April | May | June

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What's in a Strategic Plan?

Strategic Plan Major Components

Legend:
- Strategic Plan (Green)
- Action Plans (Yellow)
- Outcomes (Orange)

Level	Description
MISSION	Why we exist
VISION	What we want to be
GOALS	What we must achieve for success
OBJECTIVES (O1, O2)	Specific intentions expressed in measurable terms to achieve Goals
ACTIVITIES (A1a, A1b, A1c, A2a)	Planned actions to achieve Objectives
MEASURES (M1a1, M1a2, M1b1)	Measures and Indicators of success of Activities
OUTCOMES (O1a1-1, O1a2-1)	Desired level of performance for Measures

Two major components of a strategic plan:

1. Strategy Discernment: Provides strategic direction. Without this, planning lacks a clear purpose. (Green)

2. **2-3 year Action Plan for each Initiative:** Outlines the plan to bring the strategic direction into being. Without this, it remains a vision. (Yellow and Orange).

KPHD will have program-level annual work plans with activities aligned to the 2-3 year Action Plans and the 7-year Strategic Plan

Questions or comments -
Siri.kushner@kitsappublichealth.org

2022: Responding to Mpox

Yolanda Fong, Gabrielle Hadly, Tad Sooter & Elizabeth Davis

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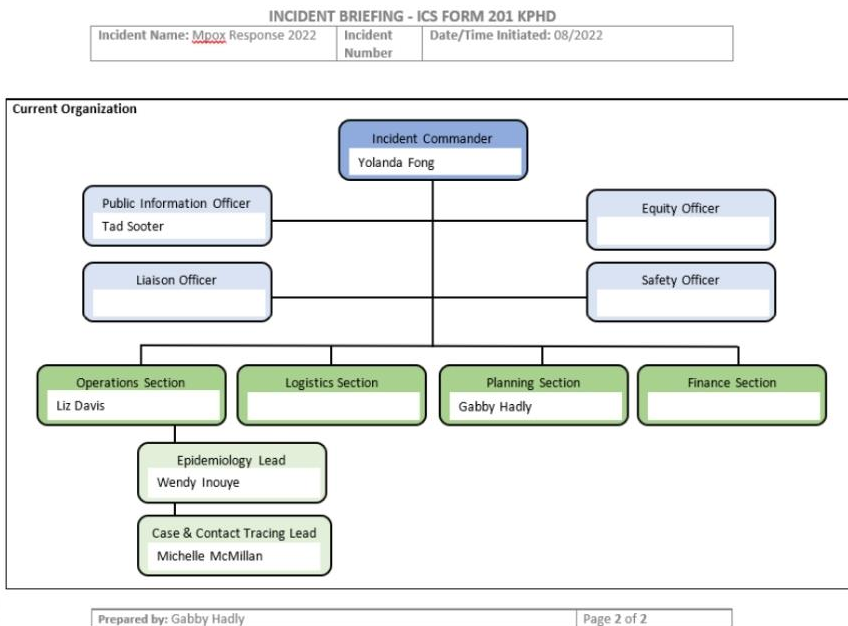
Table of Contents

KITSAP PUBLIC HEALTH DISTRICT

Acknowledgments & org chart

INCIDENT BRIEFING - ICS FORM 201 KPHD

Incident Name: Mpox Response 2022 | Incident Number | Date/Time Initiated: 08/2022

Current Organization

- Incident Commander: Yolanda Fong
- Public Information Officer: Tad Sooter
- Equity Officer
- Liaison Officer
- Safety Officer
- Operations Section: Liz Davis
- Logistics Section
- Planning Section: Gabby Hadly
- Finance Section
- Epidemiology Lead: Wendy Inouye
- Case & Contact Tracing Lead: Michelle McMillan

Prepared by: Gabby Hadly | Page 2 of 2

With special thanks to:
- George Fine
- Kaela Moontree
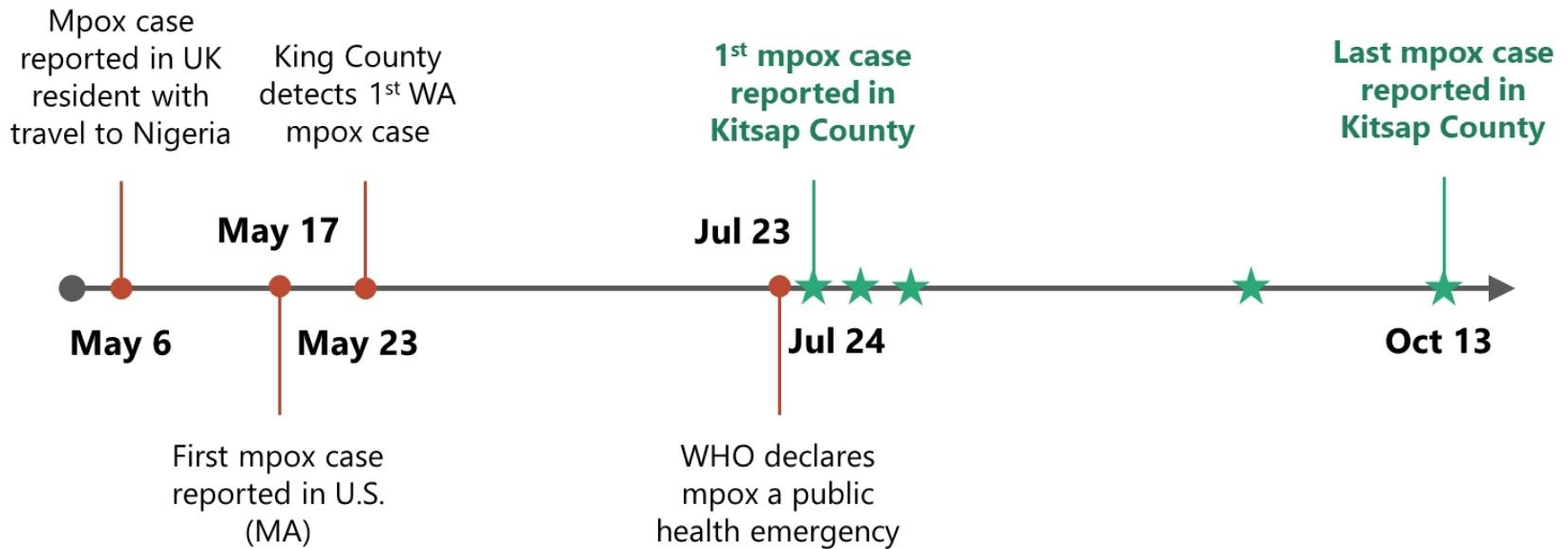- Siri Kushner
- Jessica Guidry
- KPHD staff

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What is Mpox?

- A virus in the Orthopox family
- Signs and symptoms historically have a characteristic rash preceded by prodrome
- Cases associated with this outbreak had atypical features. Rash still characteristic, but often onset in genital and perianal region (prodrome mild or not occurring)

Excerpted from CDC Clinician Outreach and Communication Activity (COCA) call 5/25/2022

2022 Mpox epidemic in brief

Mpox case reported in UK resident with travel to Nigeria

King County detects 1st WA mpox case

1st mpox case reported in Kitsap County

Last mpox case reported in Kitsap County

May 17

Jul 23

May 6

May 23

Jul 24

Oct 13

First mpox case reported in U.S. (MA)

WHO declares mpox a public health emergency

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Emergency Preparedness & Response

- Overview of the Public Health Emergency Preparedness and Response Program (PHEPR)

- Introduction to how KPHD responds to emergencies

- Overview of PHEPR's role in this response

- Review of lessons learned

What does Public Health Emergency Preparedness & Response do?

Goal: Protect and promote the health of all persons in Kitsap County during emergencies by ensuring KPHD has the plans, procedures, trainings, and relationships needed to rapidly respond to and recover from health threats and emergencies.

Before:

- Ensure KPHD staff are prepared emergencies

- Ensure the agency can carry out effective responses to public health emergencies

During:

- Help to organize and carry out responses
  - Provide trainings
  - Document response work
  - Notify partners
  - Utilize relationships

After:

- Reflect on responses - find out what went well and what can be improved

- Update plans and processes

- Conduct trainings and exercises to practice changes

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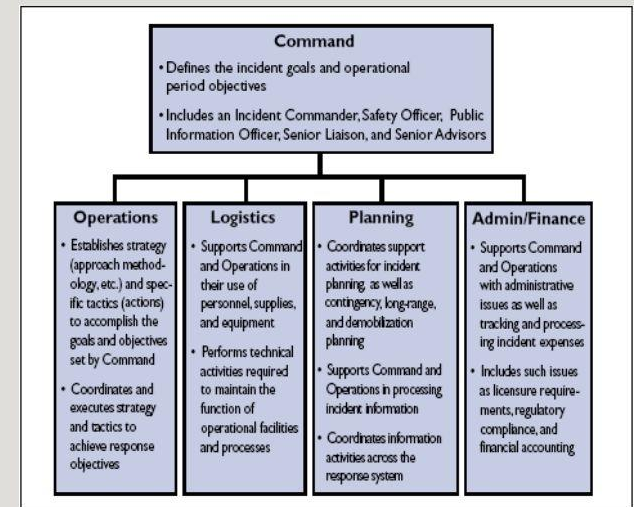
How does KPHD respond to emergencies?

Incident Command System

Provides guidance on how to organize assets and respond to incidents

Incident Command System

All responses are organized into five functional areas

Command
- Defines the incident goals and operational period objectives
- Includes an Incident Commander, Safety Officer, Public Information Officer, Senior Liaison, and Senior Advisors

Operations
- Establishes strategy (approach methodology, etc.) and specific tactics (actions) to accomplish the goals and objectives set by Command
- Coordinates and executes strategy and tactics to achieve response objectives

Logistics
- Supports Command and Operations in their use of personnel, supplies, and equipment
- Performs technical activities required to maintain the function of operational facilities and processes

Planning
- Coordinates support activities for incident planning, as well as contingency, long-range, and demobilization planning
- Supports Command and Operations in processing incident information
- Coordinates information activities across the response system

Admin/Finance
- Supports Command and Operations with administrative issues as well as tracking and processing incident expenses
- Includes such issues as licensure requirements, regulatory compliance, and financial accounting

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The 4 Levels of Response

LEVEL 4: HIGH

LEVEL 3: MEDIUM

LEVEL 2: LOW

LEVEL 1: OFF-NORMAL

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Response Level Identification Tool

	LEVEL 1 OFF-NORMAL	LEVEL 2 LOW	LEVEL 3 MEDIUM	LEVEL 4 HIGH
Level of public interest	Little to no interest - regular PIO can handle	Moderate - may be managed without ICS PIO	Likely High - ICS PIO activation needed	Potential to cause widespread alarm - call center needed
Staffing utilized	Involves one division	Involves up to two cross-cutting programs	Involves four non-cross-cutting programs from various divisions	All divisions have roles
Personnel duties	Normal	Somewhat different	Very different	Completely different
Proposed ICS structure	IC	IC, PSC, OSC, maybe PIO	IC, PSC, OSC, PIO	IC, PSC, OSC, PIO, LSC, FC
Needed ICS forms	None	IAP, SITREP	IAP, SITREP	IAP, SITREP
Who to notify	ELT, PIO	ELT, PIO, DOH, NWHRN, LHJ, Tribes, HC, EMS, DEM, PHB, Navy	ELT, PIO, DOH, NWHRN, PHB, LHJ, Tribes, HC, EMS/DEM, Navy	ELT, PIO, DOH, NWHRN, PHB, LHJ, Tribes, HC, EMS/DEM, UC, Navy
Demobilization	None	AAR, Team debrief	AAR, Team debrief	AAR, Team debrief

Communications

- How communications started and progressed

- Lessons learned

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1 **Be First:**
Crises are time-sensitive. Communicating information quickly is crucial. For members of the public, the first source of information often becomes the preferred source.

2 **Be Right:**
Accuracy establishes credibility. Information can include what is known, what is not known, and what is being done to fill in the gaps.

3 **Be Credible:**
Honesty and truthfulness should not be compromised during crises.

4 **Express Empathy:**
Crises create harm, and the suffering should be acknowledged in words. Addressing what people are feeling, and the challenges they face, builds trust and rapport.

5 **Promote Action:**
Giving people meaningful things to do calms anxiety, helps restore order, and promotes some sense of control.[3]

6 **Show Respect:**
Respectful communication is particularly important when people feel vulnerable. Respectful communication promotes cooperation and rapport.

Risk comms principles

Based on the CDC's Crisis & Emergency Risk Communication system.
emergency.cdc.gov/cerc

Engage Community • Empower Decision-Making • Evaluate

Preparation
- Draft and test messages
- Develop partnerships
- Create plans
- Determine approval process

Initial
- Express empathy
- Explain risks
- Promote action
- Describe response efforts

Maintenance
- Explain ongoing risks
- Segment audiences
- Provide background information
- Address rumors

Resolution
- Motivate vigilance
- Discuss lessons learned
- Revise plan

Risk comms principles

Based on the CDC's Crisis & Emergency Risk Communication system.

emergency.cdc.gov/cerc

KITSAP PUBLIC HEALTH DISTRICT

When to message

1st monkeypox case in US this year reported in Massachusetts

A possible case has been identified in New York.

By Mary Kekatos
May 19, 2022, 3:08 PM

What to know about monkeypox
With clusters of the disease popping up in Europe and

A Massachusetts resident has tested po
Wednesday, making it the first case of

According to a release from the Massa
male who recently traveled to Canada...
confirmed by the Centers for Disease Control and Prevention.

LOCAL NEWS

Washington state confirms first case of monkeypox

May 27, 2022, 9:36 AM

Jeff Duchin, Health Officer, Public Health for Seattle and King County speaks following the death of a a King County, Washington resident due to novel coronavirus (COVID-19) during a press conference in Seattle, Washington on February 29, 2020. (Getty Images)

BY KIRO NEWSRADIO NEWSDESK
Your best source for local news

Share

The first case of monkeypox in Washington has officially been confirmed.

Being proactive
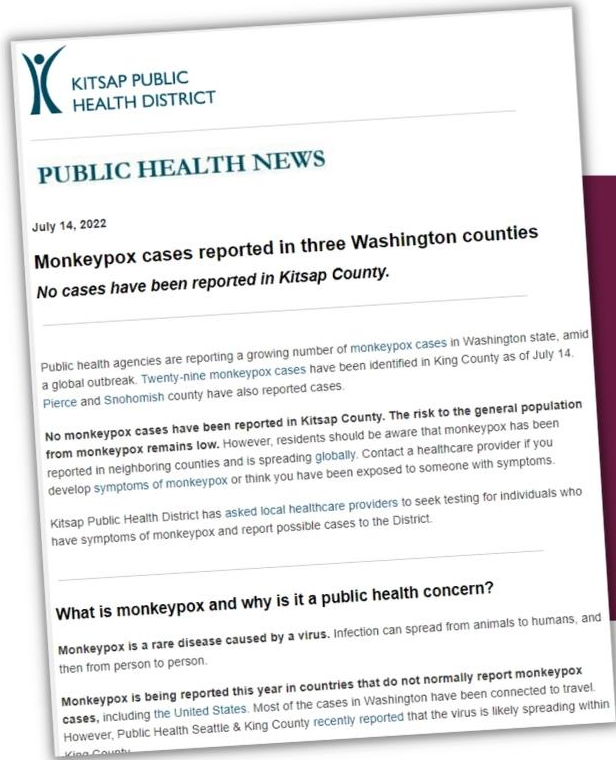
- Accurately communicate risk

- Provide simple prevention steps

- Explain what KPHD is doing

- Set expectations for ongoing communication

First case!

NEWS

First probable monkeypox case reported in Kitsap County

Nina Baker
Kitsap Sun

Published 3:18 p.m. PT July 27, 2022

View Comments

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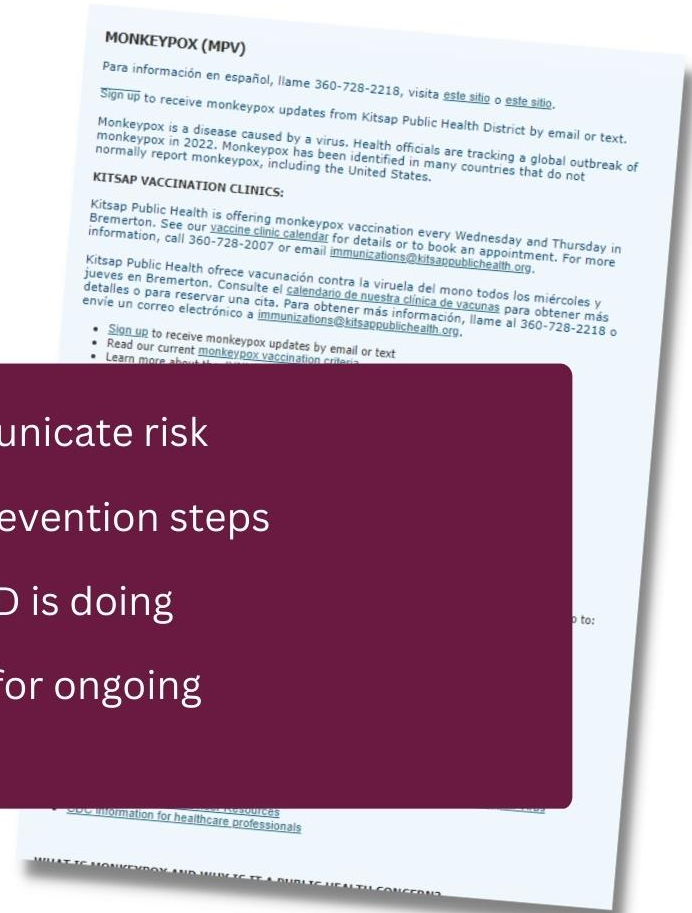
PUBLIC HEALTH NEWS

July 27, 2022

First case of monkeypox reported in Kitsap County

KITSAP COUNTY, WA — Local health officials are responding to a probable case of monkeypox in a Kitsap County resident. It is the first case of monkeypox reported in the county.

The resident, an adult male, tested positive this week for Orthopoxvirus — the group of viruses that causes monkeypox. The CDC will conduct follow-up testing to confirm the case. Health officials are working to identify and notify anyone who might have been in close contact with the infected person.

More than 100 cases of monkeypox have been identified in Washington since May, with the majority of cases reported in King County. The United States is experiencing a monkeypox outbreak this year.

Monkeypox most often spreads through close, physical contact with an infected person who has symptoms. Symptoms include a rash with fluid-filled bumps or sores, which can appear anywhere on the body. Most people who have monkeypox recover in two to four weeks. Monkeypox can cause severe illness, especially in people who are immunocompromised. See the Q&A below or visit the state Department of Health website for more information.

"The first case of monkeypox in Kitsap is cause for awareness but not alarm," Kitsap Public Health District Health Officer Dr. Gib Morrow said. "We are asking residents to be aware of how monkeypox spreads and contact a healthcare provider if they experience symptoms."

Kitsap Public Health District has also asked local healthcare providers to seek testing for individuals who have symptoms of monkeypox and report possible cases to public health. Updates on monkeypox in Kitsap County will be posted to the Kitsap Public Health District website.

Vaccination limited to close contacts

Vaccination for monkeypox is not available to the general public or local healthcare providers at this time. Vaccine supplies are limited. Vaccination is being prioritized for people who have had close

---

smallpox, cowpox and monkeypox — the genus of virus for Disease Control and Prevention will conduct follow-up testing to confirm the case as monkeypox. Health officials are currently identifying and notifying anyone who might have had contact with the infected resident, according to the press release.
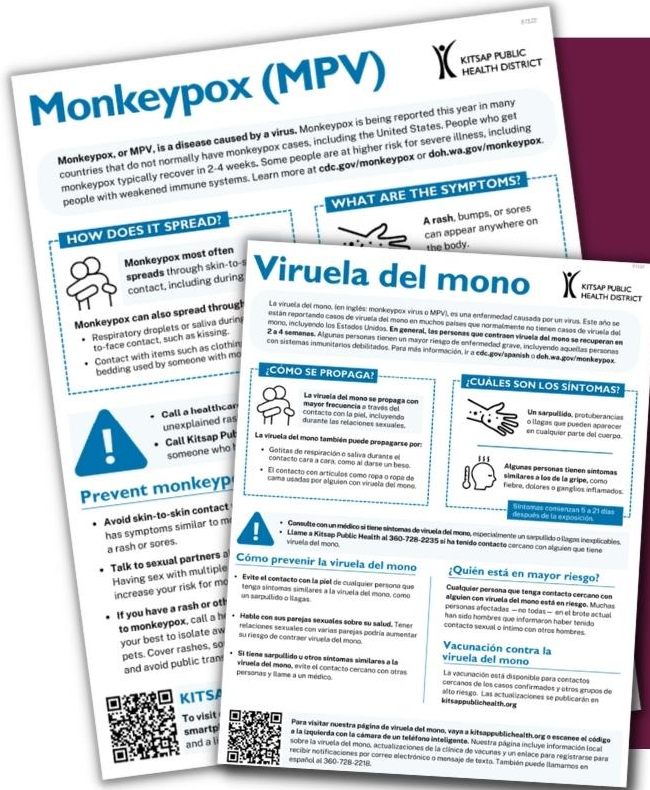

- Discuss in advance how we will communicate a case

- Clearly communicate risk

- Provide simple prevention steps

- Be prepared for inquiries

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Maintenance

- Reporting additional cases/updates

- Supporting our outreach and response efforts (vaccination, community engagement)

- Tailoring messages to specific audiences

- Producing and distribute educational materials

- Monitoring feedback, responding to inquiries

- Addressing misinformation/stigma

Outreach

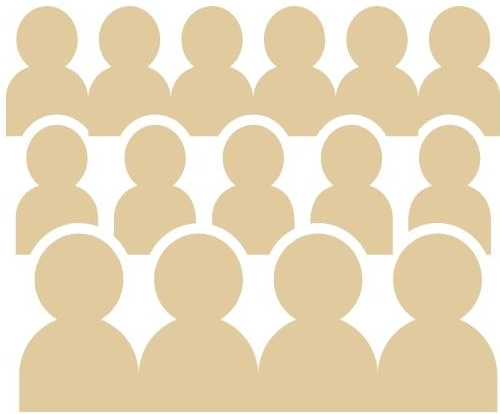- Identifying target audiences
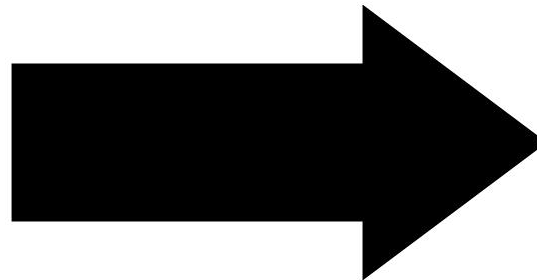- Developing messages/strategies
- Lessons learned
- Questions

Identifying audiences

- Review data & science
- Consult KPHD experts and partners
- Listen to community feedback

General population

Higher risk and/or barriers to accessing information

How do we reach our audience?

Populations most impacted by mpox outbreak

- Gay, bisexual, and other men who have sex with men

- People with multiple/anonymous sexual partners

Agencies who serve those populations

- KPHD HIV program

- Kitsap Pride and other LGBTQ+ organizations & social networks

- Healthcare and service providers

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MPOX WEBINARS

How do we communicate risk without increasing stigma?

Goal: Prevent discrimination. Ensure effective public health response.

Challenges:

- Communities most affected by mpox outbreak already experience stigma.

- Risk factors associated with mpox are stigmatized.

- "Monkeypox" name is problematic.

Strategies:

- No perfect solution.
- Communicate risk accurately: Anyone can get mpox; some behaviors increase risk.
- Focus on behaviors rather than identity.
- Tailor messages to audience.
  - General info for general audience.
  - Specific prevention guidance and discreet materials for at-risk populations.

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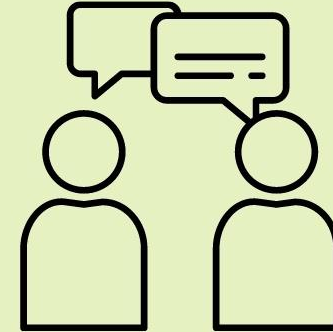
Case and contact investigations

- What we did
- Lessons learned

What we did

- **Trained investigators**
  - Mpox overview
  - Sensitive investigations trainings

- **Prepared investigation and case / contact materials**

- **Conducted investigations and follow up**
  - Isolation guidance, address questions / concerns
  - Close contact information

Medical Countermeasures

- Overview of Medical Countermeasures
- Challenges and strategies
- Summing it up

What are medical countermeasures?

Medical countermeasures (MCMs) are **medicines and medical supplies that can be used to diagnose, prevent, or treat diseases** related to chemical, biological, radiological, or nuclear threats.
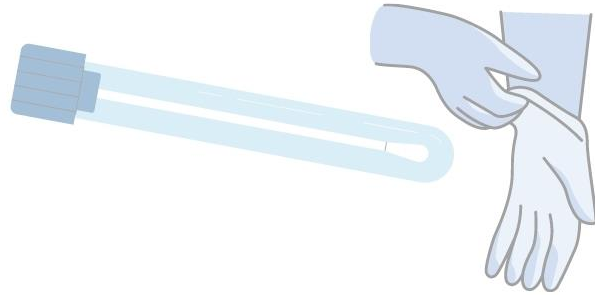
MCMs can include:
- Biologic products – vaccines, blood products, and antibodies
- Drugs – antimicrobial or antiviral drugs
- Devices – diagnostic tests to identify threat agents and personal protective equipment (PPE)
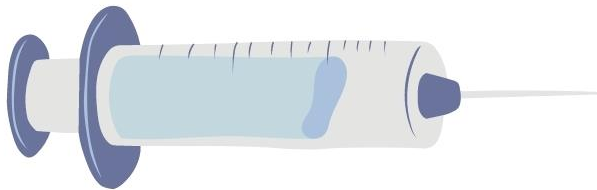
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Medical countermeasures for Mpox

Testing

Tecovirimat (TPOXX)

Jynneos vaccine

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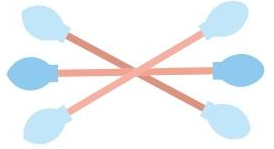
Testing

Goal: Ensure access to timely, accurate Mpox testing in Kitsap County

Challenges:

- Varied clinical presentation made knowing when to test difficult
- Confusion over when to connect with Public Health
- Reports of being turned away when seeking testing

Strategies:

- Support providers with info via:
  - Advisories
  - Webinar/Q&A
  - On-call support
- Follow-up on testing issues as they occur
- Made local issues known to state

Treatment: Tecovirimat (TPOXX)

Goal: Identify and establish a pathway to Mpox treatment in Kitsap

Challenges:

- Antiviral available under an investigational new drug (IND) protocol
- Initial requirements of IND protocol were barriers for providers
- Medication only available through the Strategic National Stockpile

Strategies:

- Worked with VM and SeaKing to understand IND protocol
- Received stock to transfer to prescribing provider if/when needed
- Engaged local VMFH to create pathway to treat

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Prevention: Jynneos vaccine

Goal: Mitigate mpox transmission through timely vaccination of close contacts and those at high risk of exposure.

Challenges:

- Extremely limited supply available only through Strategic National Stockpile
- Complex, stigmatizing and frequently changing eligibility criteria
- Prioritizing Post Exposure Prophylaxis (PEP) while allowing for Pre-Exposure Prophylaxis (PrEP) administration
- 2 dose series, 28 days apart
  - How do we ensure completion of series

Strategies:

- Served as a hub for DOH
- Adopted intradermal administration strategy when it was approved
- Release doses as first doses vs. second dose hold-back
- PrEP administration
  - Kept PEP doses set aside
  - Clinics at KPHD
  - Transferred doses to partners working with high risk populations
  - Used DOH eligibility criteria
  - Eligibility determined with attestation

Medical countermeasures in action

We used a flexible and collaborative approach to connect cases to resources.

Case study:

- The immunization team receives a call on a Friday afternoon from a parent concerned that their adult child has mpox.

- The caller describes their adult child as having a painful rash that has not been responding to topical treatment and is getting worse.

- They have taken the adult child to urgent care for mpox testing and were turned away. The adult child does not have a primary care provider, is uninsured.

Kitsap Mpox response

Total Mpox cases: **5**

TPOXX prescribed: **0**

Partner/provider webinars: **2**

Close contacts identified: **18**

Close contacts vaccinated: **11**

KPHD Jynneos clinics: **5**

Jynneos doses administered: **243**

Key partners: VMFH, Northwest Washington Family Medicine Residency, PCHS, Planned Parenthood, and the UW Madison Clinic

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Questions?

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