



Strategic Plan

2020-2025

UNITED STATES VIRGIN ISLANDS | DEPARTMENT OF HEALTH

SEPTEMBER 2020

The **United States Virgin Islands Department of Health Strategic Plan, 2020-2025** was produced by the **USVI Department of Health** in collaboration with community partners and other territorial agencies. This plan was produced with funding by the Centers for Disease Control and Prevention and technical assistance from the Association of State and Territorial Health Officials.

Suggested Citation

United States Virgin Islands Department of Health. (September 2020.) United States Virgin Islands Department of Health Strategic Plan, 2020-2025. Christiansted, USVI.

For More Information

Visit doh.vi.gov

Photos in this report are within the public domain or licensed for use.



USVI Department of Health

3500 Estate Richmond

Christiansted, 00820-4323, U.S. Virgin Islands

St. Croix: (340) 718-1311 | St. Thomas: (340) 774-9000 | St. John: (340) 776-6400

Table of Contents

Preface

Introduction

About the USVI Department of Health.....2

What is a Strategic Plan?.....4

Strategic Planning Process.....4

Vision, Mission, and Values6

Preparation for Strategic Planning7

Strategic Plan

Strategic Priorities and Objectives 12

Cross-Cutting Strategic Priorities..... 16

Initial Implementation Plan 17

Monitoring Implementation Plan Progress21

Appendix

Preface

September 2020

On behalf of the USVI Department of Health, I am pleased to share the [USVI Department of Health Strategic Plan, 2020-2025](#). This strategic document represents the work of many hands, including department leaders and leaders in our community. It is a starting point for improvement and a blueprint for the healthy future we seek to create for all Virgin Islanders.

The primary theme of our strategic plan is resiliency. The people of the U.S. Virgin Islands have overcome many challenges in the years after Hurricanes Irma and Maria devastated our islands and now as we work toward mitigating the effects of the COVID-19 pandemic. In this time of recovery, we are evaluating our capacity to serve our population. We questioned what it would take to restore our services, and what it would take for us to exceed expectations and take us beyond where we were before the storms, and before we were introduced to SARS CoV-2, the virus that causes COVID-19.

In 2020, Governor Albert A. Bryan Jr. introduced his Healthier Horizons Initiative. This is a sweeping reform of healthcare in the U.S. Virgin Islands, built on a foundation of three tenets: increasing access to care, modernizing delivery of health services to residents, and hardening healthcare infrastructure. Together with the USVI Department of Health Strategic Plan, our efforts are not just about restoring capacity but about realizing our potential. Supported by our federal and community partners, the Department of Health initiated its own process in discovering our strengths and opportunities. We know that not all USVI residents have the same opportunity to be as healthy as their neighbors, a fact unchanged by the storms. This strategic plan envisions a more equitable USVI that enables every Virgin Islander to achieve their best health.

Our department is inspired by the resiliency of the people we serve—people committed to moving forward and overcoming obstacles. This strategic plan provides a concrete approach to our department about how to prepare for tomorrow by being what our residents need today. With this strategic plan, the USVI Department of Health rededicates itself to partnering with our community and taking steps toward better health *together*.

Sincerely,



Justa E. Encarnación, RN, BSN, MBA/HCM

Health Commissioner & Chief Public Health Officer





Introduction

USVI Department of Health Strategic Plan: 2020-2025

Introduction

The purpose of this strategic plan is to guide a five-year process to improve the work and outcomes of the United States Virgin Islands Department of Health. In collaboration with partner agencies and leaders from our community, the USVI DOH has developed a vision of the future for the Virgin Islands and a mission to achieve it. This document describes our guiding principles, strategic priorities, goals, and strategies to realize a brighter, healthier future for all Virgin Islanders.

About the USVI Department of Health

The USVI Department of Health (DOH) derives its authority to provide public health services to the people of the Virgin Islands from Title 3, Title 19, and Title 27 of the Virgin Islands Code. The DOH functions as both the state health regulatory agency and the territorial public health agency for the USVI. In addition to providing oversight of 26 public health programs, as the lead agency for Emergency Services Function 8 (ESF-8), the department also oversees hospitals during a declared emergency or disaster. The DOH is governed by several divisions, each led by a Deputy Commissioner that report to the Territorial Health Commissioner ([Figure 1.1](#)). The USVI DOH is funded by both territorial and federal sources. In fiscal year 2020, the USVI DOH proposed a \$51,591,446 budget, 39.4% of which included federal funds. This budget includes 401 funded positions, and 235 of those positions are funded by the territorial government.

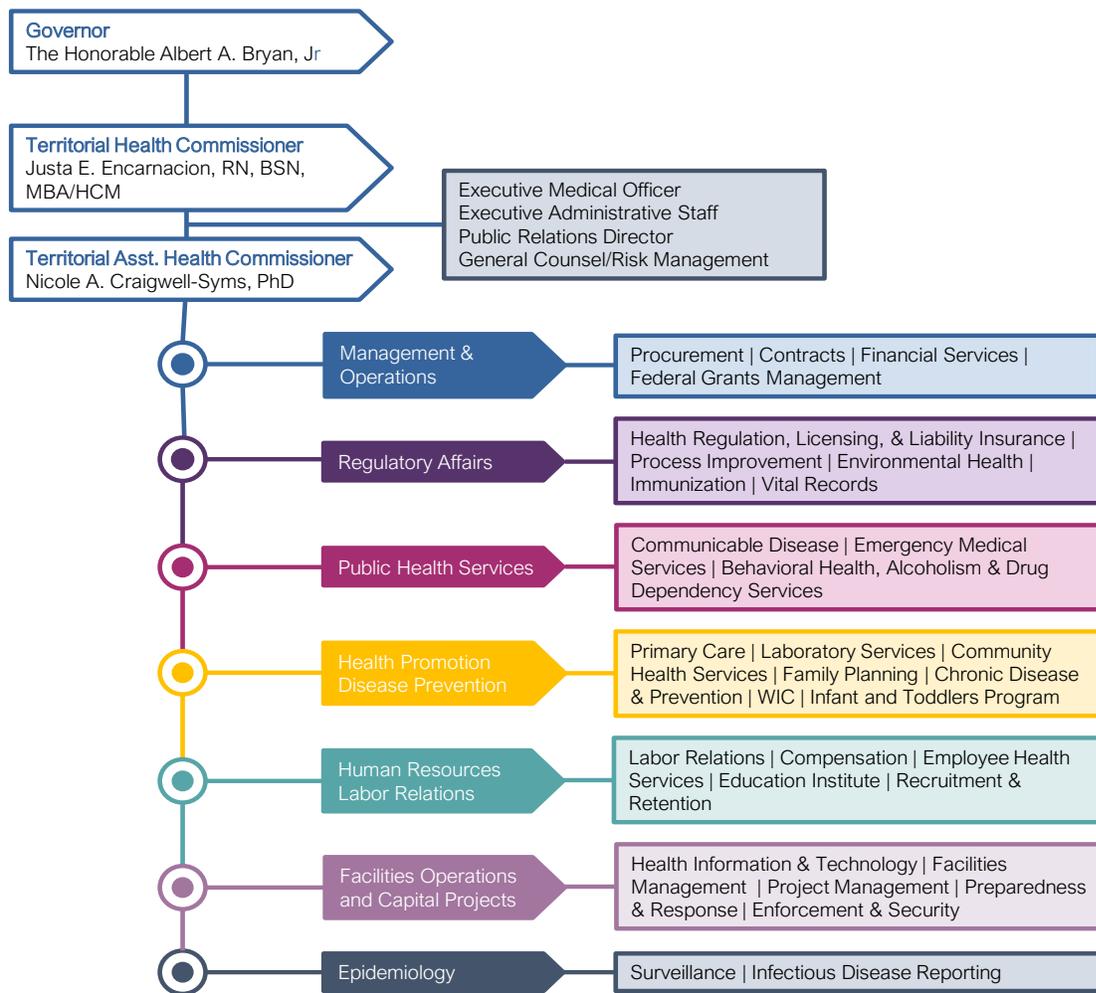
The DOH operates several public health programs to meet the health needs of Virgin Islanders. These services are aligned with the Ten Essential Public Health Services which allow the department to fulfill the three core functions of public health: assessment, assurance, and policy development. Programs include:

- Behavioral Health, Alcoholism, and Drug Dependency Services (BHADDS)
- Communicable Diseases (CDD)
- Vital Records and Statistics (VRS)
- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- Infants and Toddlers Program (ITP)
- Family Planning (FP)
- Maternal and Child Health & Children with Health Care Needs (MCH&HCN)
- Chronic Disease and Prevention (CDP)
- Environmental Health (EH)
- Professional Licenses and Certificates (PLC)
- Public Health Preparedness (PHP)

- Emergency Medical Services (EMS)
- Epidemiology and Disease Reporting (EPI)
- Public Health Laboratory (PHL)
- Community Health Services (CHS)
- Primary Care Office (PCO)
- Vector Control Program (VCP)
- Immunization (IMM)
- Division of Regulatory Affairs (RA)

More information about the specific services provided by USVI DOH programs is available at doh.vi.gov.

Figure 1.1 | **Governance Structure of USVI Department of Health**



SOURCE | USVI Department of Health

NOTE | USVI Department of Health has plans to develop a Health Research, Statistics & Quality Assurance section within the Health Promotion and Disease Prevention branch.

What is a Strategic Plan?

A strategic plan is a public health department's playbook for creating a better, healthier future for all residents. Informed by reflection on experience and performance with input from internal stakeholders and external partners, a strategic plan defines an organization's priorities, direction, and role over the next several years and provides the public health department with a manifesto for change. All strategic plans are grounded by a vision—what the department strives to achieve in the future for the people it serves—and a mission—what the department will do to get there. A strategic plan also describes a set of priorities, goals, and strategies that, if carried out, will get the department closer to realizing its vision and ultimately better health for the community.

The [USVI Department of Health Strategic Plan: 2020-2025](#) is intended to set in motion activities for improvement for the next five years. Plans like this one are a starting point for change, informed by results along the way. For this reason, the USVI DOH will be making updates on its progress toward meeting the goals outlined in this plan.

Strategic Planning Process

The USVI DOH engaged in a deliberate process to develop its five-year strategy for achieving improvements in its overall approach, leadership, infrastructure, and operations and services. This strategic plan is one of three core documents developed as part of a larger health planning process undertaken by the USVI DOH.

The overarching framework for the health planning process is the Mobilizing for Action through Planning and Partnerships (MAPP) framework, a community-driven strategic planning process for improving community health developed by the National Association of County and City Health Officials (NACCHO). MAPP is a six-phase process that emphasizes partnership with community representatives and close collaboration with organizations and agencies with responsibility for improving the health and wellness of communities. The MAPP framework was adapted to a territorial context ([Figure 1.2](#)). For example, the USVI DOH does not have a traditional local public health system with separate local public health departments. Instead, the DOH operates as two health districts: St. Croix and St. Thomas/St. John/Water Island. DOH assessments are generally territorial and less frequently by health district.

The USVI DOH recruited and formed a team charged with developing the [USVI Department of Health Strategic Plan, 2020-2025](#). The [Appendix](#) acknowledges the contributions of the Strategic Planning Workgroup, which was led by the Health Commissioner and included key department leaders, with input from frontline staff and external partners on the Mission, Vision and Values and SWOT analysis. The Association of State and Territorial Health Officials received funding from the Centers for Disease Control and Prevention to facilitate the strategic planning process and draft the Strategic Plan.

The strategic planning process included four major activities: a community health assessment; an environmental scan; an analysis of strengths, weaknesses, opportunities, and threats; and an analysis of forces of change. All activities were completed between August 2019 and May 2020. The USVI DOH held three strategic planning meetings in October 2019, February 2020, and May 2020. The strategic planning process was designed to be aligned with other steps in the health planning process: reflection on the community health assessment, development of a collaborative community health improvement initiative, and incorporation of quality improvement processes in future planning efforts.

Figure 1.2 | **Framework for the USVI Health Planning Process**



SOURCE | USVI Department of Health, Adapted from National Association of County and City Health Officials

Vision, Mission, and Values

The United States Virgin Islands Department of Health and its partners will work toward organizational excellence, guided by a vision, mission, and set of values that remind us of **who we are** and the **hope we have for our future**.

Vision

A trusted system that supports a healthy Virgin Islands.

Mission

To reduce health risks, increase access to quality health care, and enforce health standards.

Values

EQUITY | We strive to ensure everyone enjoys optimal health.

COMMUNITY-FOCUSED | We move forward in consultation with our communities, placing their needs at the forefront of our decision-making.

INTEGRITY | We approach our work ethically with a commitment to confidentiality and honesty across all levels of interaction with everyone we serve.

COMPASSION | We act with our collective 'heart' to reduce suffering and disease burden among our people.

ACCOUNTABILITY | We use our human, financial, organizational, and environmental resources with efficiency and transparency.

TEAMWORK | We collaborate internally and with external partners to capitalize on opportunities to meet the needs of our people.

INCLUSIVENESS AND RESPECT | We elevate voices that have gone unheard and ensure power is meaningfully shared.

RESULTS-ORIENTED PERFORMANCE | We embrace a culture focused on outcomes, using high-quality data to monitor our performance and enable improvement of our service.

Preparation for Strategic Planning

Community Health Assessment

The USVI DOH formed a Data Team charged with assessing the health of all Virgin Islanders and preparing a written report of findings. This process culminated in the [USVI Community Health Assessment 2020](#) report, which presents a comprehensive look at the health status and factors that affect the health and needs of the USVI. The assessment provides the USVI DOH with critical data to help pinpoint where resources are needed to prevent and address poor health. Because health is dynamic, the department intends to review key data on a regular basis as part of its commitment to monitoring health status and continuous quality improvement.

Environmental Scan

An environmental scan is a tool that enables public health departments to understand the context for meeting a department's improvement mission. Public health departments collect information, identify resources, and uncover gaps that need to be closed before undertaking improvement work. Together with other assessments such as the Community Health Assessment and a Strengths-Weaknesses-Opportunities-Threat (SWOT) exercise, the environmental scan contributes detailed information to inform the department's strategic priorities and objectives in the planning process.

In between the October 2019 and February 2020 strategic planning meetings, Strategic Planning Workgroup members were asked to consider availability of the following documentation that contributes to an environmental scan:

- Policy and legislative scans
- Evaluation and quality improvement results
- Customer service/satisfaction feedback
- Employee workforce climate surveys or information
- Preliminary information from the community health assessment
- Progress or annual reports related to strategic initiatives and preparedness efforts
- National frameworks
- Governing entity strategic direction

During the February 2020 health planning meeting, members of the Strategic Planning Workgroup brainstormed and ranked prioritization criteria to support selection of strategic priorities. The following six themes emerged as important to consider when identifying strategic priorities:

- 1) Alignment with national frameworks such as Healthy People 2030 and the public health preparedness capabilities
- 2) Gaps in services for behavioral health, early childhood interventions, and insurance coverage

- 3) Gaps in organizational capacity for data collection and analysis
- 4) Workforce morale
- 5) Quality of health care services including the recent legislative activity on EMS structure
- 6) Need for a common understanding and priorities for health

Analysis of Strengths, Weaknesses, Opportunities, and Threats (SWOT)

A key part of the MAPP process is an assessment of the strengths, weaknesses, opportunities, and threats facing health improvement efforts. In May and July of 2019, the USVI DOH leadership facilitated SWOT exercises with approximately 30 department staff across the two public health districts in St. Croix and St. Thomas respectively. Executive leadership, along with external partners, participated in a SWOT exercise in October 2019 during the USVI Health Planning 2020 Kick-off Meeting. The Strategic Planning Workgroup prioritized the top five to eight SWOT themes during the February 2020 meeting. A summary of prioritized SWOT themes is presented in **Figure 1.3**.

Figure 1.3 | **Prioritized Themes from SWOT Analysis**

| Strengths | Weaknesses |
|---|--|
| <ul style="list-style-type: none"> • Highly skilled public health workforce • Dedicated and passionate public health staff • Strong leadership • Strong partnerships • Access to federal funding | <ul style="list-style-type: none"> • Poor reputation or mistrust of government services in the community • Operational deficiencies in federal grants • Gaps in data surveillance systems, data monitoring and reporting • Low staff satisfaction/morale • Infrastructure challenges (e.g., technology, telecommunication) • Unequal access to health care |
| Opportunities | Threats |
| <ul style="list-style-type: none"> • Improve community knowledge (public and officials) • Improve DOH organizational culture • Improve staff satisfaction • Build local capacity and program sustainability • Adopt an organizational culture of quality • Improve relationships with partnership • Improve timely dissemination of information • Improve cultural competency in health care settings | <ul style="list-style-type: none"> • Regulatory challenges • Lack of sustainability when funding runs out • Limited public knowledge about public health and disease prevention • Challenging local political climate • Public health workforce shortages |

SOURCE | USVI Department of Health

Forces of Change Assessment

The Forces of Change Assessment identifies the external factors, trends, and events that are likely to affect the health of a community and the public health system that supports that community. This assessment is one of the four assessments in the MAPP process.

USVI DOH leadership engaged in an exercise to assess forces of change during the February 2020 Strategic Planning Workgroup meeting to consider high-level changes (e.g., social, economic, political, technological, environmental, scientific, legal, ethical) that will affect the USVI public health system. During the exercise, the Workgroup considered the following questions to identify external factors, trends, and events:

- What characteristics of our population, geography, or jurisdiction might affect community health or public health system functioning?
- Are there any trends that might affect our community’s economic outlook?
- What one-time event or situation has occurred that might affect the health of residents or the public health system?

A summary of the results of the Forces of Change analysis is presented in **Figure 1.4**.

Figure 1.4 | **Key Forces of Change**

| External Factors |
|--|
| <ul style="list-style-type: none">• Changing demographics (including transient/undocumented, refinery workers, those that leave after hurricanes, aging population)• Changes in the healthcare delivery system and structure• Information technology (e.g., authority for IT and mechanism to access)• Public health workforce that reflects the changing population (recruitment and talent pool)• Medicaid expansion• Climate change, public health preparedness, and crisis funding• Economy (e.g., public/private market forces)• Social media• Movement toward incorporating “Health in all Policies” approach across the territory (i.e., considering health and wellness into policymaking across all sectors)• Global pandemic and emerging infection of COVID-19^a |

SOURCE | USVI Department of Health

^aThe Forces of Change exercise was completed before the COVID-19 pandemic emerged. The issue was added due to the magnitude and extent of the pandemic as a key force of change.

Development of Strategic Priorities, Goals, and Objectives

Due to the challenges posed by the COVID-19 pandemic, the USVI DOH developed its strategic priorities, goals, and objectives over the course of two virtual meetings. During the first virtual meeting in May 2020, the Strategic Planning Workgroup refined the strategic priorities brainstormed during the February 2020 meeting and further defined cross-cutting priorities. The Workgroup members voted on their top seven strategic objectives across the five strategic priorities. While all strategic objectives will be implemented over the next five years, the DOH selected seven priorities on which to focus during the first two years of their strategic work plan. At a second virtual meeting in May 2020, the Workgroup convened to complete implementation planning worksheets for each of the prioritized strategic objectives. For each prioritized objective, the Workgroup developed up to five strategies, measures, target dates, and a staff lead for accountability. The remainder of this document describes each of the strategic priorities and identifies key strategies for each of the seven prioritized objectives that the USVI DOH will focus on during the first two years of this process.



Strategic Plan

USVI Department of Health Strategic Plan: 2020-2025

Strategic Plan

Strategic Priorities and Objectives

The USVI DOH developed **five strategic priorities** to guide our work in 2020-2025. Addressing these priorities will help us meet a central challenge: **Make Health the Virgin Island's Shared Value**. Along with **four cross-cutting priorities**, these strategic priorities are the foundation of our **Strategic Map (Figure 1.5)**. This is our roadmap for achieving our mission and vision.

Strategic Priority A: Create a nimble, fiscally viable, quality-driven organization

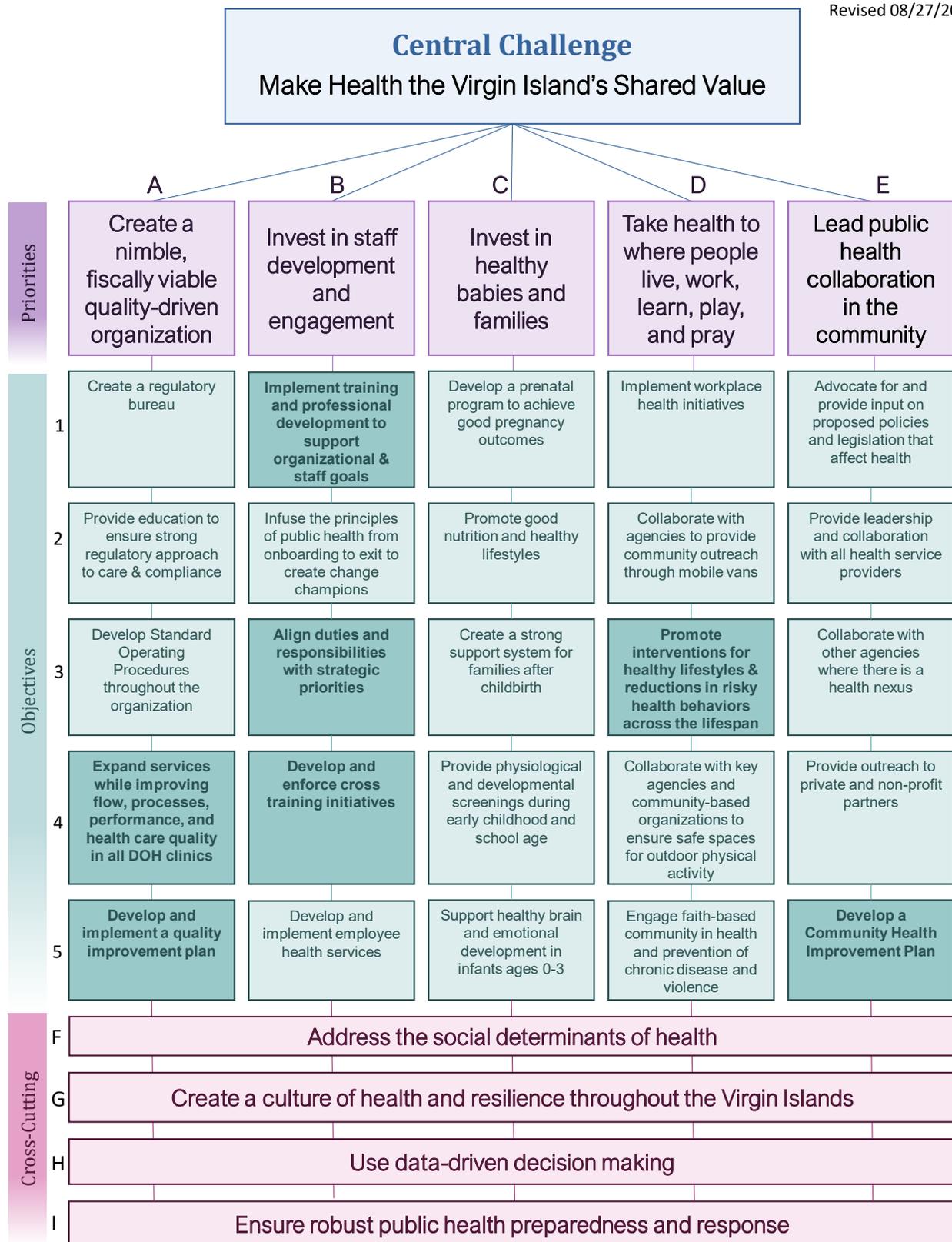
The USVI DOH believes that creating an organizational culture driven by quality will lead to broad scale improvements in the department's work and the health of residents. A workforce that believes quality is an important outcome of its work will strive to improve, innovate, and adapt to needs through collaboration. By choosing to be "nimble," the USVI DOH recognizes the importance of being ready to implement action in response to changing community needs. The USVI DOH has begun to adopt quality improvement and performance management approaches to its initiatives, and this strategic priority will codify that commitment. In addition to improving workflow and efficiency organizationally through enhanced administrative measures, the USVI DOH will prioritize the training of its workforce to ensure quality improvement is present in how all programs conduct their activities. This priority is also aligned with the USVI DOH's commitment to formalizing quality through its larger health planning process.

The department will fulfill this priority by executing five objectives:

- A1.** Create a regulatory bureau
- A2.** Provide education to ensure strong regulatory approach to care and compliance
- A3.** Develop Standard Operating Procedures throughout the organization
- A4.** Expand services while improving flow, processes, performance, and health care quality in all DOH clinics
- A5.** Develop and implement a quality improvement plan

Figure 1.5 | **Strategic Map** *A trusted system that supports a healthy Virgin Islands.*

Revised 08/27/20



SOURCE | USVI Department of Health

Strategic Priority B: Invest in staff development and engagement

The USVI DOH believes that our public health workforce is our most important asset. We cannot do our work without the talents and energy of our workforce, and as such, it is our responsibility to ensure that we invest in our team to ensure their skills are current and relevant to emerging public health practice. We also acknowledge that our workforce functions best when supported and included in department decision-making. Simply articulating that leadership believe that staff perspectives are important is not enough—staff must see their voices represented in leadership decision-making processes. The SWOT process also identified several opportunities to increase skills of staff and to ensure clear communication about employee expectations and roles throughout the department. Workforce capacity also emerged in the assessment process, especially as the USVI continues its recovery from hurricane-caused devastation. Without sufficient public health workforce, we will not be able to improve the health of our residents. As residents themselves, our staff also reflect the health inequities of the USVI and require support to achieve their best health.

The department will fulfill this priority by executing five objectives:

- B1.** Implement training and professional development to support organizational and staff goals.
- B2.** Infuse the principles of public health from onboarding to exit to create change champions.
- B3.** Align duties and responsibilities with strategic priorities.
- B4.** Develop and enforce cross training initiatives.
- B5.** Develop and implement employee health services.

Strategic Priority C: Invest in healthy babies and families

Healthy families are a foundation for a healthy USVI. When mothers are supported before and during their pregnancy, their children are more likely to be on a healthy path and to achieve their full health potential as adults. The health of our infants was recently threatened by Zika disease, and while not a current threat, the experience left our community with a legacy to care for pregnant women and ensure their needs are met. We also know that we have work to do to ensure families with infants and young children are supported so that the entire family can be well—including nutrition, physical activity, and mental health.

The department will fulfill this priority by executing five objectives:

- C1.** Develop a prenatal program to achieve good pregnancy outcomes.
- C2.** Promote good nutrition and healthy lifestyles.
- C3.** Create a strong support system for families after childbirth.

C4. Provide physiological and developmental screenings during early childhood and school age.

C5. Support healthy brain and emotional development in infants ages 0-3.

Strategic Priority D: Take health to where people live, work, learn, play, and pray

The USVI DOH believes that health begins in our communities. It is not enough to simply provide services and hope that the community will avail themselves of those services. Health needs to be accessible in the community where people are. The USVI DOH operates several programs and initiatives, but not in every corner of the territory. The CHA report identified communities that experience health inequities that require targeting of resources and increased visibility of DOH- and partner-provided services. Health promotion also involves partnership with community organizations already doing work on the ground to improve the well-being of residents, particularly those residents at highest risk for poor health and premature death. We know that we must seek our residents actively in places we have not fully invested in order to help them pursue their optimal health and wellness and to engender trust in health services provided throughout the USVI.

The department will fulfill this priority by executing five objectives:

D1. Implement workplace health initiatives

D2. Collaborate with agencies to provide community outreach through mobile vans.

D3. Promote interventions for healthy lifestyles and reductions in risky health behaviors across the lifespan.

D4. Collaborate with key agencies and community-based organizations to ensure safe spaces for outdoor physical activity.

D5. Engage faith-based community in health and prevention of chronic disease and violence.

Strategic Priority E: Lead public health collaboration in the community.

The USVI DOH believes that a public health system functions best as a team that includes partners from sister government agencies, community organizations, and the healthcare system. Health equity will only be pursued and achieved for our residents if we lead by working with our communities to solve these complex problems. The USVI DOH is committed to establishing and strengthening existing partnerships and seeking new partners in other sectors. Through these collaborative partnerships, the DOH will pursue policy change at a territorial level while supporting local communities and providers to lead where they are. A key part of this will be a Community Health Improvement Plan developed with partners and community members that will form the basis of a long-term health improvement effort. This means that the DOH and its partners will work together with the community to achieve long-lasting improvement and close health inequity gaps.

The department will fulfill this priority by executing five objectives:

- E1. Advocate for and provide input on proposed policies and legislation that affect health.
- E2. Provide leadership and collaboration with all health service providers.
- E3. Collaborate with other agencies where there is a health nexus.
- E4. Provide outreach to private and non-profit partners.
- E5. Develop a Community Health Improvement Plan.

Cross-Cutting Strategic Priorities

Cross-cutting priorities are overarching focus areas that are incorporated as strategies during implementation of the strategic plan. For example, developing and implementing a community health worker program is a strategy that seeks to reduce the impact of social inequities across many different strategic priorities. The USVI DOH identified four major cross-cutting areas of work in the development of strategic objectives. These cross-cutting priorities will be achieved by implementing objectives across the five major strategic priority areas. These priorities are:

Cross-Cutting Priority F: Address the social determinants of health



Health is shaped by many social factors. If a resident loses their home or job (or both), how will they be able to stay healthy or address health problems? Public health requires partnership with many sectors to enable every resident to achieve their optimal health and wellness. The USVI DOH will consider and address social determinants in the development of department activities as a core approach to solving public health problems by establishing programs that address the root causes of health inequities. USVI DOH will collaborate with VI Department of Human Services and infuse the social determinants of health in the USVI Medicaid Plan.

Cross-Cutting Priority G: Create a culture of health and resilience throughout the Virgin Islands



Residents of the USVI are a resilient people, often in the face of external factors that are common to island life. The threat of natural disasters and emerging infectious diseases leads people to live day to day, but health is a long-term endeavor. The USVI DOH will develop and implement strategies to make pursuit of health top of mind and possible for all residents. As part of this cross-cutting area, the USVI DOH

will consider strategies that engage the community in developing their own solutions for health improvement.

Cross-Cutting Priority H: Use data-driven decision making



Data is powerful in helping us answer questions about our health and wellness. The USVI DOH understands that assessment, as a core function of public health, must be done well in order to serve communities. The USVI DOH will make investments in improving data systems and the processes that leverage those data for decision-making. The USVI DOH will develop agency-wide data visualization tools to ensure its workforce has access to timely information to support decision-making.

Cross-Cutting Priority I: Ensure robust public health preparedness and response



One of the USVI DOH's prime responsibilities is to ensure a robust public health response when threats to public health appear inclusive of natural and man-made disasters. In a time of COVID-19, this role is both obvious and life-saving. The USVI DOH will continue to invest its resources in preparing for major challenges to public health. The USVI DOH will consider the potential impact of public health emergencies on strategic plan implementation.

Initial Implementation Plan

The USVI DOH is committed to realizing progress toward each strategic priority. In order to meet the demand of our strategic priorities, we have identified seven strategic objectives to prioritize for early implementation within the first two years of this five-year effort. In this section, we present strategies and measurable targets for each of the seven prioritized strategic objectives. While no strategic objectives were prioritized for Priority C, it should be noted that the USVI DOH already has several efforts in process to improve the health of families.

Strategic Priority A: Create a nimble, fiscally viable, quality-driven organization

Objective A4 | Expand services while improving flow, processes, performance, and health care quality in all DOH clinics.

| Result or Strategy | Measure | Target Date |
|--|--|----------------|
| A4.1. Create accuracy in billing and coding. | 30% Decrease in denials 10% Increase in revenue | September 2021 |
| A4.2. Develop telehealth-enabled systems for all clinical areas throughout the department of health. | Increase in number of virtual client services by 50% | September 2021 |

Objective A5 | Develop and implement a quality improvement program.

| Result or Strategy | Measure | Target Date |
|--|--|-------------|
| A5.1. Create a Quality Improvement (QI) Council for QI Plan development and future QI activities. | Council established | June 2021 |
| A5.2. Identify the current culture of quality, organizational and staff knowledge of QI, and needs using a self-assessment tool. | Survey completed | April 2021 |
| A5.3. Select metrics that are linked to the larger goal to monitor progress quarterly | Conduct quarterly chart reviews, surveys among clients or simple observations of events to validate improvement of metrics | August 2021 |
| A5.4 Final QI Plan | Final QI Plan Completed | July 2021 |
| A5.5. Utilize the QI Council to help implement and evaluate the Plan annually. | 1 review and evaluation completed beginning 2022 | June 2022 |

Strategic Priority B: Invest in staff development and engagement

Objective B1 | Implement training and professional development to support organizational and staff goals.

| Result or Strategy | Measure | Target Date |
|---|---|-------------------------------------|
| B1.1. Assess training needs. | Assessment completed | July 2021 |
| B1.3. Collect, analyze and Prioritize (triage) training needs based on assessment results to create training plan that includes, but is not limited to the following: <ul style="list-style-type: none"> • QI Training • Supervisory/management training • Leadership dev • Financial management training for Dc, Dir, Grants Managers | training plan completed | September 2021 |
| B1.4. Identify or create resources for training. | Training library established | December 2021 |
| B1.5. Implement Training Plan. | 10% increase in productivity per quarter as measured by established metric. Assess baseline staff satisfaction and measure changes annually. | July 2021/ ongoing July 2021 |
| B1.6 Identify rewards for leadership and staff when successful. | Identify baseline leadership and staff satisfaction through satisfaction survey and measure changes annually. 10% increase in productivity level by quarter. | July 2021 August 2021 |

Objective B2 | Align duties and responsibilities with strategic priorities.

| Result or Strategy | Measure | Target Date |
|---|---|--------------------|
| B2.1. Craft/update job descriptions. | 10-15 descriptions per quarter | July 2021/ ongoing |
| B2.2. Develop performance evaluation tool linked to the criteria-based job descriptions. | Develop tool to quantify results | August 2021 |
| B2.3. Orient established and new staff to the (revised) job descriptions. | 100% of staff introduced to current job descriptions | December 2021 |
| B2.4 Increase understanding of public health, the agency's culture of quality, and commitment to the work as an essential service. | Develop script to use in recruiting, orienting and evaluating performance of public health workers. | July 2021 |
| B2.5. Conduct annual performance reviews using criteria-based job descriptions | 25% of reviews completed quarterly | January 2022 |

Objective B3 | Develop and enforce cross training initiatives.

| Result or Strategy | Measure | Target Date |
|--|------------------------------------|---------------|
| B3.1. Discuss cross-training initiative/concepts with unions. | Re-establish Labor Union Committee | May 2021 |
| B3.2. Review training and needs assessment data by job classifications and existing career ladders. | Develop cross training tool | July 2021 |
| B3.3. Pilot cross-training with a subset of staff/unions (e.g., security guards). | Establish pilot program | December 2021 |
| B3.4. Provide opportunities for staff to volunteer and work in teams to address improvements. | Up to 3 opportunities | December 2020 |

Strategic Priority D: Take health to where people live, work, learn, play, and pray

Objective D3 | Promote interventions for healthy lifestyles and reductions in risky health behaviors across the lifespan.

| Result or Strategy | Measure | Target Date |
|--|---|----------------|
| D3.1. Implement a community health worker program with the introduction of a Public Health Educator and identify public health classes. | Conduct 3 public health classes/ annum (diabetes, hypertension, ESRD). | December 2021 |
| D3.2. Revitalizing the walkability initiative through redesigning the built environment. | Conduct 3 walkability activities per quarter | September 2020 |
| D3.3. Expand current evidence-based home visiting programs to promote healthy babies and healthy families. | Increases participation in home visiting programs by 50% annually | June 2022 |
| D3.4. Introduce healthy dietary options to community based organizations. | Partnerships with up to 3 faith communities | June 2021 |
| D3.5. Develop evidence-based programs that strengthen healthy interpersonal relationships across the lifespan. | Successful infusion of D3.5 into each community health worker program developed | December 2021 |

Strategic Priority E: Lead public health collaboration in the community

Objective E5 | Develop a Community Health Improvement Plan (CHIP): *Healthy Virgin Islands 2030*

| Result or Strategy | Measure | Target Date |
|---|----------------------------------|----------------|
| E5.1. Assemble internal USVI DOH team to develop a project plan and community engagement based on the CHIP framework. | Establishment of a project plan | September 2020 |
| E5.2. Coordinate and launch Advisory Council/Steering Committee of external partners to guide CHIP development process and content. | Advisory Committee charter | February 2021 |
| E5.3. Engage stakeholders to identify priorities. | Identification of 3-5 priorities | April 2021 |
| E5.4. Develop objectives, strategies, and measures. | 1 draft plan | May 2021 |
| E5.5. Finalize Community Health Improvement Plan consistent with most recent version of PHAB standards and measures. | 1 CHIP: <i>Healthy VI 2030</i> | June 2021 |

Monitoring Implementation Plan Progress

The USVI DOH is committed to implementing the [USVI Department of Health Strategic Plan, 2020-2025](#). The USVI DOH will form an internal Implementation Workgroup as a subcommittee of the Executive Leadership Team, responsible for developing strategies and performance measures and identifying key staff to lead the work. Aligned with the department’s value of **results-oriented performance**, performance measures will be monitored by the Implementation Workgroup and reported to the QI Council on a quarterly basis and to the USVI DOH Executive Leadership Team biannually.



Appendix

USVI Department of Health Strategic Plan: 2020-2025

Strategic Planning Workgroup

USVI Department of Health

Justa E. Encarnacion, Territorial Health Commissioner
Nicole Craigwell-Syms, Territorial Assistant Health Commissioner, Management and Operations
Hadiyah C. Charles, Deputy Commissioner, Regulatory Services
Joan Jean Baptiste, Deputy Commissioner
Reuben Molloy, Deputy Commissioner, Facilities, Operations, and Capital Projects
Renan Steele, Deputy Commissioner, Public Health Services
Janis Valmond, Deputy Commissioner, Health Promotion Disease Prevention
Esther M. Ellis, Territorial Epidemiologist
Dwayne Henry, Chief Legal Counsel
Tai Hunte-Cesar, Medical Director
Tatia Monell-Hewitt, Chief Financial Officer
Marc Jerome, Medical Director
Donna M. Christensen, Public Health Strategist
Shanna O'Reilly, Chief of Staff
Louise Baa, Executive Assistant
Aniah John, Executive Assistant
Tesda Plunkett, Confidential Aide
Sandra Charles, Deputy Director, Public Health Preparedness
Monique Dorsett, Policy Assistant/Policy Advisor to the Assistant Commissioner
Angela Henry, Financial Services
Berlina Wallace-Berube, Director, Primary Care Office

USVI Partners

Julia Sheen, DrPH, MPH, Policy Advisor, Health & Human Services, Office of the Governor
Gary Smith, Director, Medical Assistance Program (MAP), USVI Department of Human Services
Noreen Michael, Research Director, CERC, University of the Virgin Islands
Masserae Sprauve Webster, CEO Fredriksted Health Care, Inc.
Jacquelyn George, CFO, Fredriksted Health Care, Inc.
Moletto Smith, Executive Director, St. Thomas East End Medical Center Corporation, Inc.

Centers for Disease Control and Prevention

Sam Taveras, Acting Director, Office for Insular Affairs (US Territories and Freely Associated States)
Yanelis Gonzalez, Public Health Analyst, Office of Insular Affairs
Terrance Perry, Director, Office of Grant Services
Roberto "Bob" Ruiz, Deputy Director for Management and Operations, Center for Preparedness and Response