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1. Promote Healthy Living Throughout the Lifespan

1.1 Increase the availability and utilization of accredited or recognized Diabetes Self-Management Education (DSME) program and Diabetes Prevention Program (DPP) in Alabama.

Strategic Goal: Empower patients to take charge of their health and well-being through evidenced based behavior change principles and programs.

Action Steps:

1.1.1 Number of DSME programs in the state.
1.1.2 Number of counties with a DSME or DPP program.

1.2 Improve Access to healthy foods and increase physical activity.

Strategic Goal: Decrease Alabama’s overall obesity rate from 35.6% to 35% through physical activity strategies that support healthy lifestyles and evidenced based practices that improve access to healthy foods. The Alabama Community Health Improvement Plan (ACHIP) addresses nutrition and physical activity as the number two most pressing healthcare issue in the state.

Action Steps:

1.2.1 Increase participation in Scale Back Alabama and the Scale Back app annually.
1.2.2 By August 2017, host the Walkability Summit and address strategies to improve physical activity in neighborhoods and communities. The Walkability Summit will bring together state agencies including the Alabama Department of Transportation (ALDOT) and other organizations to develop a collaborative action plan to address walkable communities.
1.2.3 By May 2019, have 40% of Alabama school districts participating in Farm to School programs.
1.2.4 By January 2019, increase the number of sites that are offering healthy foods and beverages served in public/private facilities, organizations, and worksites.

1.3 Decrease Infant Mortality.

Strategic Goal: Decrease Alabama’s infant mortality rate to 7.8 infant deaths per 1,000 live births by implementing evidence-based strategies and addressing the social determinants of health in maternal and child health populations and communities.

Action Steps:

1.3.1 Integrate the Life Course Perspective Theory approach across systems by improving healthcare services for women and infants through facilitation of national, regional, state, and local collaborations that address health and wellbeing across the life continuum.
1.3.2 Identify factors that contribute to fetal and infant deaths by conducting the Fetal and Infant Mortality Review Program in all perinatal regions of the state.
1.3.3 Provide education to raise awareness about morbidity and mortality rates and the strategies being conducted to improve birth outcomes and reduce mortality.
1.3.4 Collaborate with Healthy Start, Centering Pregnancy, Nurse Family Partnership, and other programs to address social determinants and inequities of health for women, infants, and families.
1.3.5 Raise awareness regarding the role health equity plays on health outcomes.
1.4 Reduce the prevalence of suicide.

**Strategic Goal: Question Persuade Refer (QPR) Gatekeeper Training**
Similar to Cardio-Pulmonary Resuscitation (CPR) during a cardiac emergency, QPR is an emergency response to someone in a suicide crisis. The ACHIP mental health and substance abuse stakeholder workgroup recognizes suicide as one of the top public healthcare concerns in Alabama.

**Action Steps:**

1.4.1 By December 31, 2017, increase the number of gatekeepers trained in Alabama by 5%.
1.4.2 By December 31, 2017, increase the number of mental health workers trained by QPR by 5%.

1.5 Reduce the rate of opioid related deaths

**Strategic Goal:** Data on substance abuse and opioid related deaths is not readily available. ADPH and ACHIP stakeholders recognize the need to centralize data sources and disseminate information to help define the opioid crisis and develop data driven strategies for prevention.

**Action Steps:**

1.5.1 By April 28, 2017, create a stakeholder workgroup meeting to begin collecting and sharing data and create a statewide opioid and heroin prevention plan.
1.5.2 By December 31, 2017, identify and develop collaborative relationships with other opioid and heroin prevention programs across the state so that shared resources and goals can benefit all partners.

2. Increase the Impact of ADPH Programs and Services on populations and local communities through education, mobilization, and coordination of services to improve access to care and health outcomes.

2.1 Use telehealth communications to overcome poor social determinants of health and close barriers that inhibit access to health care services.

**Strategic Goal:** Collaborate with specialists and entities to facilitate broad spectrum of telehealth services in rural and underserved areas of Alabama. Increase access to care by expanding the use of telemedicine in rural and underserved areas of Alabama (ACHIP).

**Action Steps:**

2.1.1 Execute 12 new collaborative agreements so that non-ADPH health care providers will utilize telehealth communications at ADPH county health departments by December 31, 2017. This includes specialists in major health care institutes such as University of Alabama Birmingham School of Medicine, University of Alabama Children’s Hospital, and University of South Alabama to establish a comprehensive statewide telehealth network to increase access to specialty care by December 31, 2017.
2.1.2 Increase the number of telehealth carts in county health departments from 21 to 30 by December 31, 2017.
2.2 Develop marketing, communication and branding strategies.

**Strategic Goal:** Increase the public's awareness and understanding of ADPH and the services provided.

**Action Steps:**

2.2.1 Create a survey to evaluate ADPH marketing/outreach activities that address population health issues.

2.2.2 Change the departmental website domain name and further develop the Digital Media Branch (DMB) to ensure our promotion, education and dissemination efforts are reaching the broadest possible audiences in the quickest and most efficient manner.

2.2.3 Develop quarterly public health outreach materials for county health department and area staff to utilize for outreach to community members regarding population health concerns.

2.2.4 Increase awareness of the Alabama Public Health Training Network (ALPHTN) and available training for community healthcare providers.

2.3 Improve access to risk appropriate care for mothers and infants.

**Strategic Goal:** Increase to 90 percent the number of very low birthweight infants delivering at an appropriate facility including infants less than 32 weeks gestation.

**Action Steps:**

2.3.1 Endorse regional community-based perinatal care systems to assure the appropriate level of care is self-declared by delivering facilities in Alabama.

2.3.2 Support transitional care to ensure infants are connected to services and families are connected to appropriate resources in their communities.

2.3.3 Promote quality care improvement and standard safety protocols through continuous quality improvement processes using tools and resources already developed, tested, and utilized to assure optimal care before, during, and after birth.

2.3.4 Continue the Collaborative Improvement and Innovation Network to Reduce Infant Mortality work to provide the best available care to women and infants of known disparate populations.

2.4 Ensure access to care by providing adequate provider network for Children’s Health Insurance/ALL Kids (non-Medicaid) enrollees.

**Strategic Goal:** Ensure that at least 95% of ALLKids enrollees have access to healthcare providers within minimal mileage parameters established below.

**Action steps:**

2.4.1 By December 31, 2017, no less than 95% of ALLKids enrollees will have a choice of two of more primary care physicians located within 20 miles of their home.

2.4.2 By December 31, 2017, 95% of urban ALL Kids enrollees will have two or more dentists located within 10 miles of their home.

2.4.3 By December 31, 2017, 95% of rural ALL Kids enrollees will have at least one dentist located within 25 miles of their home.

2.4.3 By December 31, 2017, 95% of suburban ALL Kids enrollees will have two or more dentists located within 15 miles of their home.
3. Prevent Occurrence and Spread of Disease

3.1 Reduce the annual burden of reportable diseases, limit transmission, and prevent future cases through surveillance, investigation, diagnosis, and treatment.

Strategic Goal: The Bureau of Communicable Diseases (BCD) long-term goal is the prevention and elimination of infectious diseases in Alabama. Each BCD division’s short-term goal is to reduce the annual burden of infectious diseases, limit transmission, and prevent future cases through surveillance, investigation, diagnosis, and treatment.

Action Steps:

3.1.1 Expand the Detect, Test, and Report (DTR) educational campaign to include additional information about emerging, vaccine preventable, and sexually transmitted diseases so that all divisions of the Bureau of Communicable Disease can offer this program to disease reporters.

3.1.2 Raise awareness of the infection control and prevention readiness tools by conducting non-regulatory visits and surveys, offering consultation, conducting educational webinars, and posting survey tools, resources, and information to the ADPH website.

3.1.3 Update existing and draft new infectious disease response plans (e.g. Pandemic Influenza, Avian Influenza, Zika, Ebola, etc.) in collaboration with external and internal partners, and conduct training and exercises to ensure timely and appropriate response to infectious disease threats.

3.2 Maintain an all hazards emergency operations plan

Strategic Goal: Improve effective coordination of the many agencies and organizations involved in emergency response, manage the many response and recovery efforts and build community resilience to withstand and recover from an emergency. The Center for Emergency Preparedness (CEP) coordinates Alabama’s health, medical, and social services in the event of public health threats and emergencies.

Action Steps:

3.2.1 Attend quarterly meetings of the Medical Needs Sheltering Planning Committee to identify and discuss sheltering issues, plans, and challenges and conduct annual site assessments and training with local counterparts.

3.2.2 Participate in the Alabama Healthcare Preparedness Program to advance preparedness and access to care during emergencies within the eight coalitions.

3.3 Reduce foodborne illness associated with food consumption.

Strategic Goal: Safeguard the public's health by providing consumers with food that is safe and unadulterated. The goal is achieved by inspecting facilities to determine compliance with state and federal sanitation requirements, conducting laboratory analysis of key foods to determine potential contamination, and training of both the industry workforce and health department personnel in sanitation standards.

Action Steps:

3.3.1 Perform 300 evaluations of dairy farms, milk and food processing plants, or shellfish harvest areas through farm and plan inspections, plant equipment tests, or laboratory samples annually.

3.3.2 Conduct at least one training session for public health environmentalists to learn food safety sanitation requirements annually.
3.4 Create an Alabama Healthcare Data Collaborative (AHDC) Workgroup.

**Strategic Goal:** Establish a mechanism to obtain access to statewide data to determine disease incidence and prevalence statistics for key conditions and diseases in Alabama. The current information is fragmented, incomplete and inconsistent because the information is often survey driven or based on estimates from other states. Comprehensive information regarding disease incidence and outcomes is critical in developing population health strategies that will result in improvement in health outcomes and better access to care for Alabama’s residents.

**Action Steps:**

3.4.1 Create and convene an AHDC Workgroup of key stakeholders to develop a project plan and timeline to achieve the strategic goal.

3.4.2 Identify data needed to address the top five leading health concerns derived from the Community Health Assessment (CHA) and the top three health care focus areas of the Community Health Improvement Plan (CHIP).

4. Regulatory – Enforce Laws and Regulations that Protect Health and Ensure Safety

4.1 Review existing laws and work with key stakeholders to ensure laws are consistent with public health evidence-based practices and health equity needs.

**Strategic Goal:** Review and update laws and regulations so that they remain current and reflect changes in societal behaviors and actions that place individuals and communities at risk.

**Action Steps:**

4.1.1 Review policies and regulations drafted by the AHDC to ensure they are consistent with public health evidence-based practices and health equity needs.

4.2 Educate individuals and organizations on the meaning, purpose, and benefit of public health laws and how to comply.

**Strategic Goal:** Establish an educational program of information and guidance on the meaning and implementation of the State Board of Health Rules for Assisted Living Facilities and Specialty Care Assisted Living. The goal is to improve the understanding of the regulations by the assisted living industry and consumers of assisted living services.

**Action Steps:**

4.2.1 Communicate with the Assisted Living Association of Alabama (ALAA) at least twice annually to determine current areas of interest.

4.2.2 Provide presentations that focus on regulatory topics during the ALAA semi-annual conferences.

4.2.3 Accept invitations, as workload permits, to visit various regions of the state conducting training on the regulations for assisted living facility staff and corporate representatives, attorneys, pharmaceutical company staff and consumers.

4.2.4 Participate with other providers of assisted living administrator training to conduct workshops for administrator specific continuing education units.

4.2.5 Submit articles of interest to the assisted living industry and consumers to the quarterly Bureau of Health Provider Standards Newsletter

4.2.6 Team with the Assisted Living Association of Alabama (ALAA) education committee in providing training to prospective administrators.
4.3 Conduct and monitor public health enforcement activities and coordinate notification of violations among appropriate agencies

**Strategic Goal:** Monitor and enforce lead contractor regulations through the Lead Contractor Certification Program. The goals of the Lead Contractor Certification Program are to safeguard construction workers, occupants, particularly children from lead based paint and dust hazards and provide safe work practice standards for lead free homes.

**Action Steps:**

4.3.1 Develop and maintain written procedures and protocols for conducting enforcement actions

4.3.2 Conduct and monitor inspection activities of regulated entities according to mandated frequency and/or risk analysis methods.

4.3.3 Ensure procedures and protocols are followed for both routine and emergency situations requiring enforcement activities and complaint follow-up.

4.3.4 Identify patterns or trends in compliance from enforcement activities and complaints.

4.3.5 Coordinate notification of violations to the public, when required, and facilitate information exchange among appropriate agencies regarding enforcement activities, and trends or patterns.

5 Effective Agency Processes

**Goal 1: Increase the use of technology and data.**

5.1 Development of Electronic Health Record (EHR)

**Strategic Goal:** Implement an EHR which will include meaningful use/health information exchange (HIE), billing and management tools, and quality improvement (QI) tools.

**Action Steps:**

5.1.1 Define system configuration.

5.1.2 Test the EHR.

5.1.3 Pilot the EHR.

5.1.4 Conduct statewide training and coordinate system roll out.

5.2 Create a Centralized Billing Office

**Strategic Goal:** Improve the efficiency and effectiveness of our current billing capabilities and improve the ADPH’s ability to track, interpret and implement new healthcare rules and regulations.

**Action Steps:**

5.2.1 Assess current billing infrastructure inefficiencies and gaps.

5.2.2 Develop new template for centralized billing office.

5.2.3 Create staffing model.

5.2.4 Develop timeline for implementation.
5.3 Enhance data development and analysis capability focusing on outcomes.

**Strategic Goal:** Develop the capacity/ability to perform statewide assessment/analysis of health outcomes.

**Action Steps:**
- **5.3.1** Explore data analytic enterprises in other states.
- **5.3.2** Identify potential data analytic services and clients.
- **5.3.3** Identify potential quality improvement (QI) needs.
- **5.3.4** Access external statewide data and conduct analysis.

5.4 Expand strategic performance management activities.

**Strategic Goal:** Streamline and improve critical processes across the health department and foster a culture of continuous quality improvement.

**Action Steps:**
- **5.4.1** Assess the performance tracking tools in use by at least five ADPH programs.
- **5.4.2** Use performance management data to inform decision making.
- **5.4.3** Encourage and lead quality improvement activities included in the Quality Improvement Plan.

5.5 Development of productivity standards (clinical and non-clinical)

**Strategic Goal:** Maximize the efficiency of employees by minimizing barriers to productivity to be competitive in the health care environment.

**Action Steps:**
- **5.5.1** Conduct statewide clinic efficiency study and identify best practices.
- **5.5.2** Identify minimum standards of performance for individual programs.
- **5.5.3** Determine corrective action plan.

5.6 Advance the Competencies of ADPH’s Workforce

**Strategic Goal:** Prepare ADPH workforce for new competencies and skills needed in the transformative healthcare environment through training and professional development opportunities.

**Action Steps:**
- **5.6.1** Identify staff competencies and training needs against adopted public health core competencies.
- **5.6.2** Promote and expand workforce development opportunities to address training gaps.