



# Strategic Planning: An Integrated Approach



*Lorelei Kurimski, Office of Strategic Planning  
Mahmoud Metwali, Univ. of Iowa MPH Intern  
Christopher Atchison, Director*

*State Hygienic Laboratory at the University of Iowa  
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# Why?

- **Problem Statement:** SPHLs have traditionally operated as categorized programs.
- **Solution:** SPHLs can operate as an integrated system that aligns with local/state/national public & private partners.



# The Foundation

**Purpose:** Fundamental reason why your organization exists.

**Mission:** Answers the question, “What are you attempting to accomplish?”

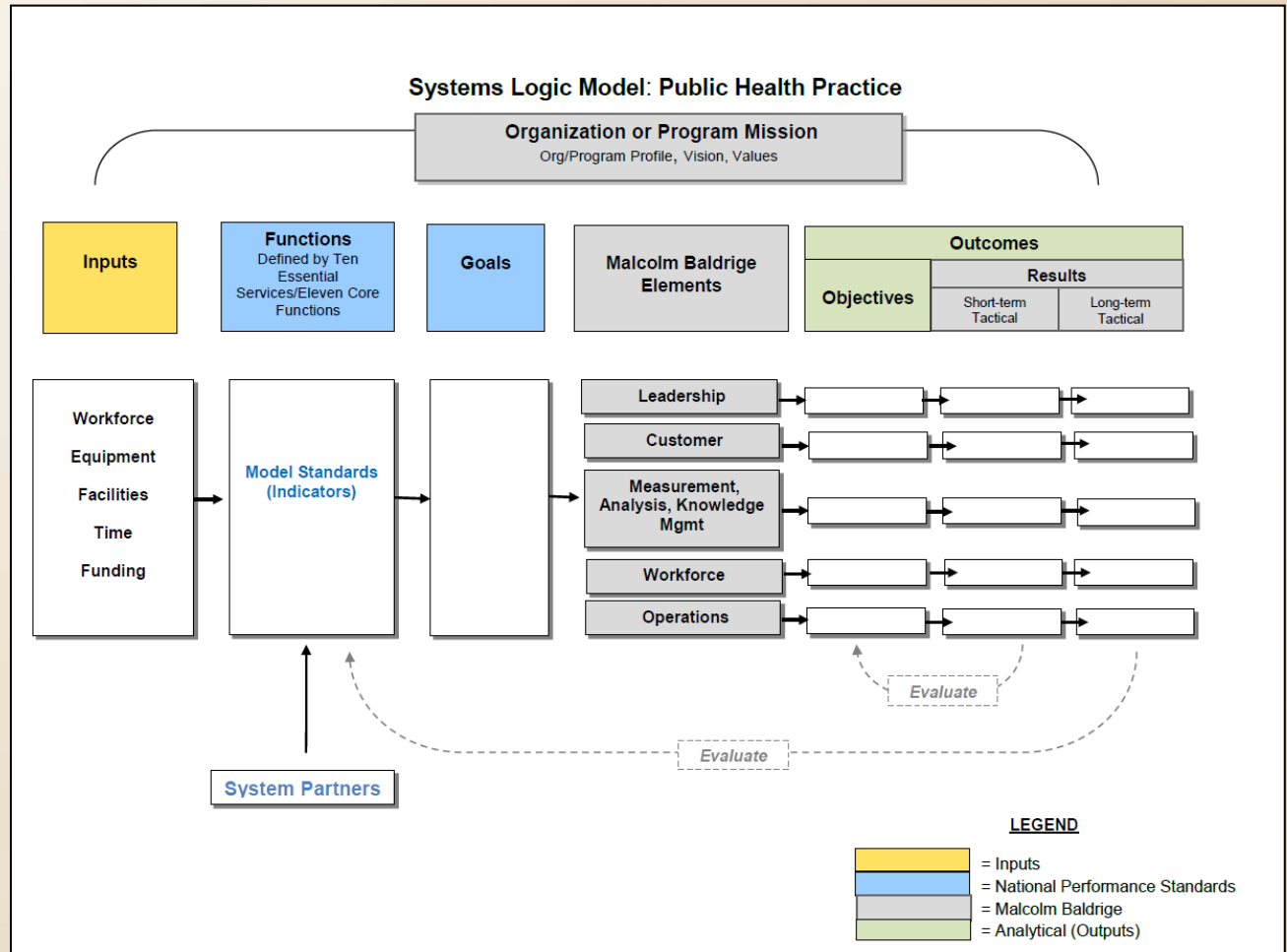
**Vision:** Desired future state. Describes where you are headed, what you intend to be, and how you will be perceived in the future.

**Values:** Guiding principles that reflect and reinforce the desired culture, support and guide the decision-making of your workforce - aids in accomplishing the mission and attaining the vision.

**\*\* *Needed before performing any strategic planning***



# Combining L-SIP (WHAT) & Baldrige (HOW)





# Laboratory Systems Improvement Program (L-SIP)

- Developed in partnership with APHL, CDC
- Nationally Recognized: Assessments done in more than 25 states
- Focuses on the *Public Health Laboratory system*
- Model Standards & Key Indicators

What it does: Uses framework of Ten Essential Public Health Services

**Provides the WHAT  
(optimal performance level)**



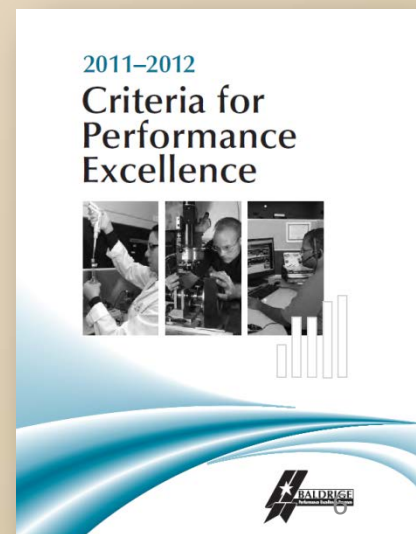


# Malcolm Baldrige

- Developed through NIST
- Nationally Recognized: 59 state/local/regional programs
- Method to manage *organizational systems*
- Used by top organizations in the US:  
IBM, Boeing, Henry Ford Health System

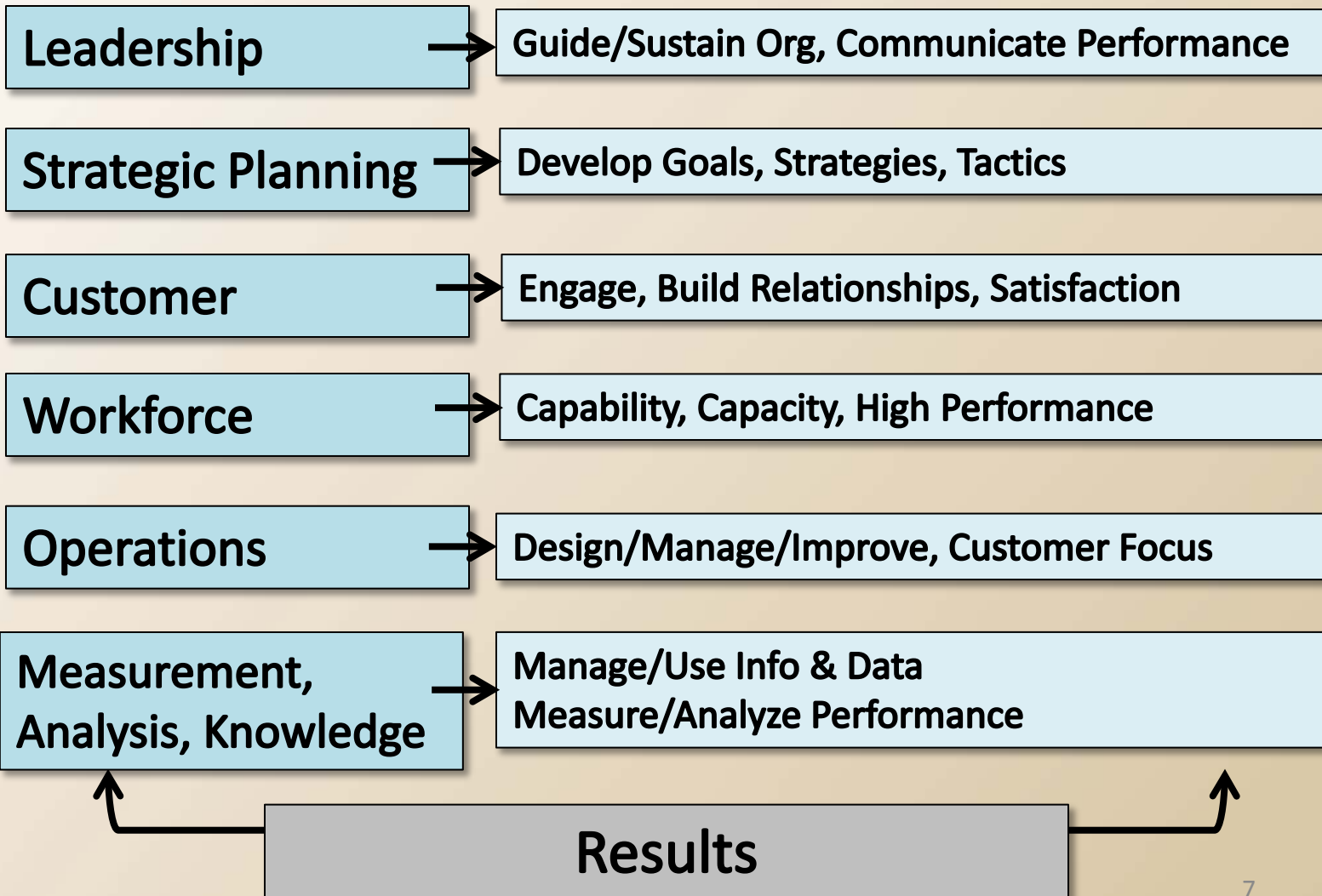
What it does: Process & results  
maturity level using universal criteria

**Provides the HOW**



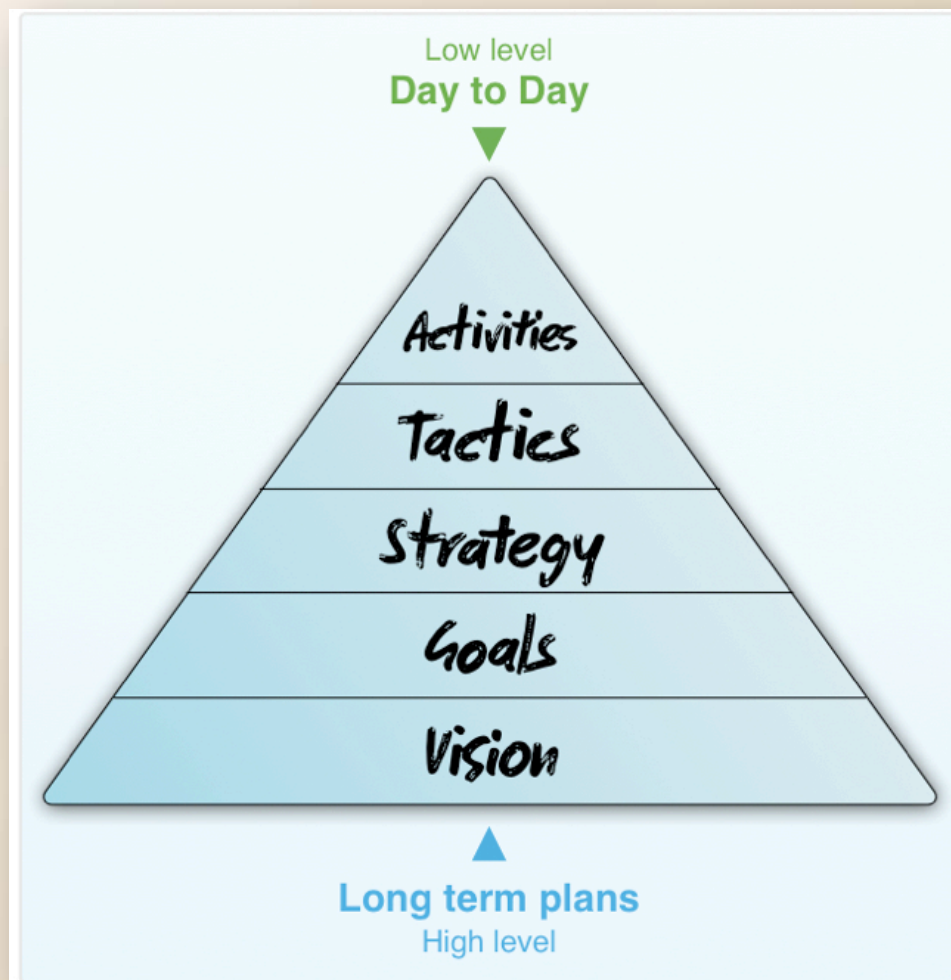


# Baldrige Criteria





# Goals, Strategies and Tactics







# Example

- **Goal:** Build a workforce environment conducive to high performance work.
- **Strategy:** Build ongoing workforce leader development to expand competencies.
- **Tactic:** Implement a Leadership Program for new managers and supervisors. Include knowledge management and soft skills.

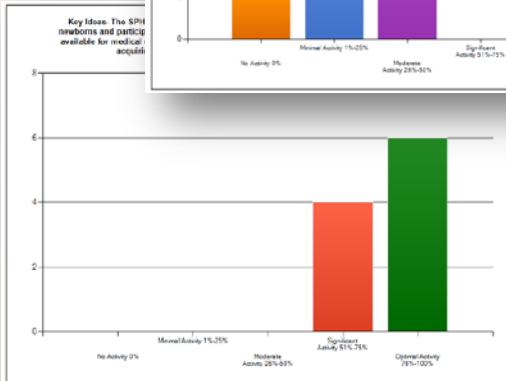
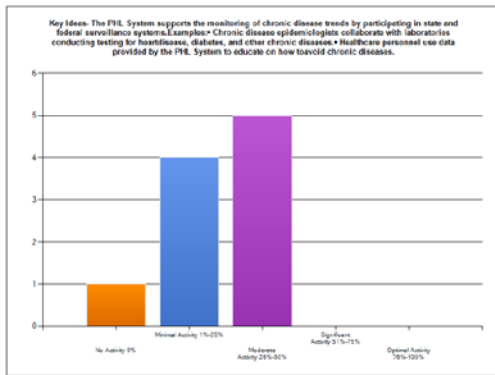


# 5 Steps to Develop Goals, Strategies, Tactics

1. Determine scope of enterprise to improve and identify key stakeholders
  - ❖ SHL Executive Leaders/Key Program Managers
2. Perform the L-SIP Assessment
  - ❖ Individual & consensus
3. Identify critical and urgent performance gaps from the Assessment consensus scores and reframe into Goals/Objectives for improvement.



# L-SIP Self-Assessment



Initial Analysis (based on **>25** STD DEV, **<70** UPPER RANGE)

**Consensus on Poorest Performance:** Lowest Scoring, Large STD DEV, Low UPPER RANGE  
**Best Performance:** Highest Scoring, Low STD DEV, high UPPER RANGE

ESSENTIAL SERVICE #	L-SIP MODEL STANDARD & KEY IDEAS	MEAN	MEDIAN	STD DEV	68% of numbers fall within range	
					LOWER RANGE	UPPER RANGE
ESSENTIAL SERVICE #1: MONITOR HEALTH STATUS TO IDENTIFY COMMUNITY HEALTH PROBLEMS	1.1: Monitoring of Community Health Status	70.0	75.0	15.0	55.0	85.0
	1.1.1- The SPH Laboratory System identifies infectious disease and environmental sentinel events, monitors trends, and participates in state and federal surveillance systems. <b>Biomonitoring surveillance</b>					
	1.1.2- The SPH Laboratory System monitors congenital, inherited, and metabolic diseases of newborns and participates in state and federal surveillance systems.	90.0	100.0	12.2	77.8	102.2
ESSENTIAL SERVICE #2: DIAGNOSE AND INVESTIGATE HEALTH PROBLEMS AND HEALTH HAZARDS IN THE COMMUNITY	1.2: Surveillance Information Systems	35.0	37.5	16.6	18.4	51.6
	1.2.1- The SPH Laboratory System supports the monitoring of chronic disease trends by participating in state and federal surveillance systems.					
	1.2.2- The SPH Laboratory System has a secure, accountable and integrated information management system for data storage, analysis, retrieval, reporting and exchange.	57.5	50.0	22.5	35.0	80.0
ESSENTIAL SERVICE #3: INFORM, EDUCATE, AND	2.1: Appropriate and effective high quality testing	67.5	75.0	19.5	48.0	87.0
	2.1.2- The SPH Laboratory System partners collaborate to strengthen electronic surveillance systems.					
ESSENTIAL SERVICE #2: DIAGNOSE AND INVESTIGATE HEALTH PROBLEMS AND HEALTH HAZARDS IN THE COMMUNITY	2.1: Appropriate and effective high quality testing	82.5	87.5	19.5	63.0	102.0
	2.1.1- The SPH Laboratory System assures the effective provision of services at the highest level of quality to assist in the detection, diagnosis, and investigation of all significant health problems and hazards.					
ESSENTIAL SERVICE #3: INFORM, EDUCATE, AND	2.1: Appropriate and effective high quality testing	57.5	62.5	19.5	38.0	77.0
	2.1.2- The SPH Laboratory System has the necessary system capacity, authority, and preparations in place to rapidly respond to emergencies that affect the public's health.					
ESSENTIAL SERVICE #3: INFORM, EDUCATE, AND	3.1: Outreach to Partners	57.5	50.0	16.0	41.5	73.5
	3.1.1- The SPH Laboratory System creates and delivers consistent information to community partners about relevant health issues associated with laboratory services.					



# New Goals





# 5 Steps to Develop Goals, Strategies, Tactics

4. Perform Baldrige Criteria for Performance Excellence evaluation based on your new Goal/Objective.

5. For each Goal/Objective, develop specific improvement plans based on the lowest Baldrige scores.

- Plans include Strategies/Sub-strategies, Tactics
  - ❖ Performance Metrics/Targets
  - ❖ Owners
  - ❖ Timelines



# Baldrige Assessment

Factor	0-5%	10-25%	30-45%	50-65%	70-85%	90-100%
<b>Approach</b>	No systematic approach to item requirements is evident; information is anecdotal.	The beginning of a systematic approach to the basic requirements of the item is evident.	An effective, systematic approach, responsive to the basic requirements of the item, is evident.	An effective, systematic approach, responsive to the overall requirements of the item, is evident.	An effective, systematic approach, responsive to the multiple requirements of the item, is evident.	An effective, systematic approach, fully responsive to the multiple requirements of the item, is evident.
<b>Deployment</b>	Little or no deployment of any systematic approach is evident.	The approach is in the early stages of deployment in most areas or work units, inhibiting progress in achieving the basic requirements of the item.	The approach is deployed, although some areas or work units are in early stages of deployment.	The approach is well deployed, although deployment may vary in some areas or work units.	The approach is well deployed, with no significant gaps.	The approach is fully deployed without significant weaknesses or gaps in any areas or work units.
<b>Learning</b>	An improvement orientation is not evident; improvement is achieved through reacting to problems.	Early stages of a transition from reacting to problems to a general improvement orientation are evident.	The beginning of a systematic approach to evaluation and improvement of key processes is evident.	A fact-based, systematic evaluation and improvement process and some organizational learning, including innovation, are in place for improving the efficiency and	Fact-based, systematic evaluation and improvement and organizational learning, including innovation, are key management tools; there is clear evidence of refinement as a result of	Fact-based, systematic evaluation and improvement and organizational learning through innovation are key organization-wide tools; refinement and innovation, backed by analysis and sharinz. are evident throuzout

A= Approach	0 to 100%	There is a method used to accomplish process
D= Deployment	0 to 100%	The approach is applied consistently & executed by all work units
L= Learning	0 to 100%	The approach is evaluated & refinements shared
I= Integration	0 to 100%	The approach aligns to organizational needs & harmonized across all processes/units to meet organizational goals
S= Systematic	Goal= 100%	Approaches are well ordered, repeatable, fact-based, with ne weaknesses/gaps

GUIDANCE: The overall score is

## LSIP Assessment Gap Being Addressed

Assure a Competent Public Health and Personal Healthcare Workforce

Goal/Objective (from LSIP Key Idea for Improvement)

Goal #1: Build a Workforce Environment Conducive to High Performance Work

Baldrige Criteria and Key Questions		A	D	L	I	Points
<b>Leadership</b>	Organizational processes that include: Senior leaders' actions guide/sustain organization. Senior leaders communicate/encourage high performance work. Governance system & approach to leadership improve. Ensure legal/ethical behavior, fulfill societal responsibility, support key communities.	10-25%	30-45%	10-25%	10-25%	100
<b>Customer</b>	Organizational processes that include: Listening to customers & gain satisfaction/dissatisfaction information. Engage customers to serve their needs & build relationships. Determine product/service offerings & communication mechanisms to support customers. Build customer relationships.	10-25%	0-5%	0-5%	0-5%	100
<b>Measurement and Knowledge Management</b>	Organizational processes that include: Measure, analyze, review, improve performance using data/information. Manage information, organizational knowledge, information technology. Ensure quality/availability of needed data, information, software, hardware for workforce, suppliers, partners, collaborators, customers.	30-45%	50-65%	30-45%	30-45%	100
<b>Workforce</b>	Organizational processes that include: Manage workforce capability/capacity. Maintains a safe, secure, supportive climate. Engage, compensate, reward workforce to achieve high performance. Assess workforce engagement & use results to achieve higher performance. Workforce & leader development to achieve high performance.	30-45%	30-45%	10-25%	30-45%	100
<b>Operations</b>	Organizational processes that include: Design, manage, improve work systems to deliver customer value, prepare for potential emergencies, achieve success/sustainability. Design, manage, improve key work processes to deliver customer value, achieve success/sustainability.	30-45%	30-45%	30-45%	30-45%	100

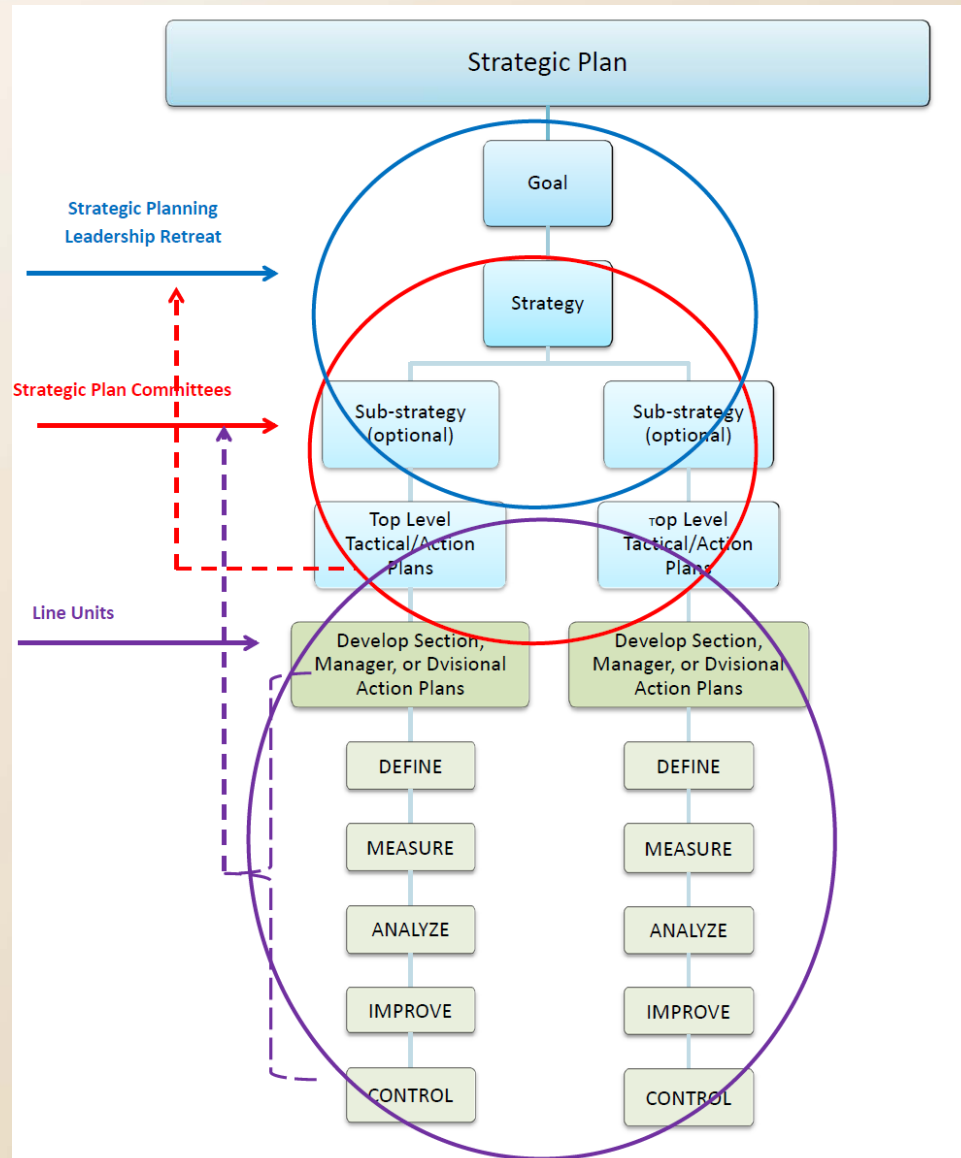


# New Strategies





# Strategic Plan Development







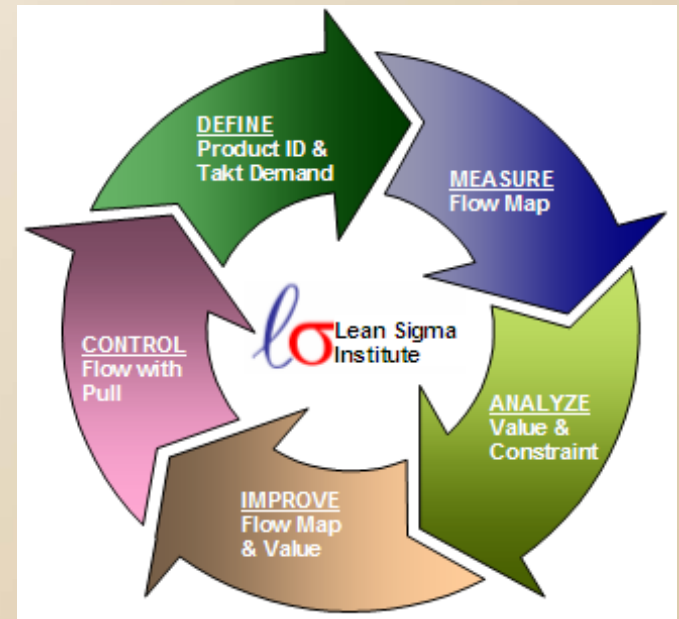


# Strategic Plan Committees

New Strategic Goals	Admin Exec Rep	Staff & Staff Council (SC) Representatives*	Division Rep
1. WORKFORCE	1 SME-1	SC: 1 Staff: 3	2
1. CUSTOMERS	2	SC: 1 Staff: 1	4
1. IMPROVE & INNOVATE	2	SC: 1 Staff: 2	3
1. FINANCIAL VIABILITY	3	SC: 1 Staff: 1	3
1. SME	1 SME-1	SC: 1 Staff: 3	2



# Moving from Top Level Tactics to Activities (*Action Plans*)





# Using DMAIC to Build Action Plans

**Define:** What you currently know.

- A problem statement
- The customer(s)- direct, indirect, stakeholders
- What are the critical process outputs?
- The target process

**Measure:** The data collection step

- Define the measurement plan
- Test the measurement system
- Collect the data

**Analyze:** Analyze the data collected

- Identify gaps between current performance and goal performance
- Identify how the process inputs (Xs) affect the process outputs (Ys)
- List and prioritize potential opportunities to improve (OFIs)

**Improve:** Identify creative solutions to fix problems

- Focus on the simplest and easiest solutions
- Create a detailed implementation plan
- Deploy improvements

**Control:** Monitor the improvements to ensure continued success



# Example

Goal	Strategy	Line Unit Owner	Tactic	Top Level Tactic	FY14																	
					J	A	S	O	N	D	J	F	M	A	M	J						
Workforce	2. Build ongoing workforce leader development to expand competencies	HR Director	10	Develop a leadership training program to build key competencies for new leaders, managers and supervisor. Include knowledge management and soft skills.							1	2	3	4								



Related Goal:	WORKFORCE: Build a workforce environment conducive to high performance work	
Strategy:	2. Build ongoing workforce leader development to expand competencies.	
Committee:	Anderson, Kosier, Beney, Pendergast, Sexton, Sullivan, Kurimski	
Top Level Tactic:	Tactic 10: Develop a leadership training program to build key competencies for new leaders, managers and supervisor. Include knowledge management and soft skills.	
AMOUNT OF TIME TO COMPLETE :	4 MONTHS (begin 11/1/13)	
step1	Get organized.	
step2	Collect and evaluate any data/information available on topic. Capture best practices and benchmarking data.	
step3	Develop program. Include process to collect performance metric data.	
step4	Communicate the new program to staff. Provide training sessions if needed.	
step5	Deploy new program. Collect and evaluate performance metric data. Develop reports and trending.	
step6	Obtain feedback from users on suggestions/opportunities for improvement (OFIs). Generate report with key themes.	
step7	Based on performance metric data and user feedback, reconvene team. Establish performance target goal. Incorporate OFIs, deploy and monitor.	



# Performance Metrics & Targets

- **Metric**

- ❖ Measures something that should change (improve) as a *result* of a Goal or Strategy
- ❖ Not an action or task

- **Target**

- ❖ Measurable numbers you want to achieve

**Example:**

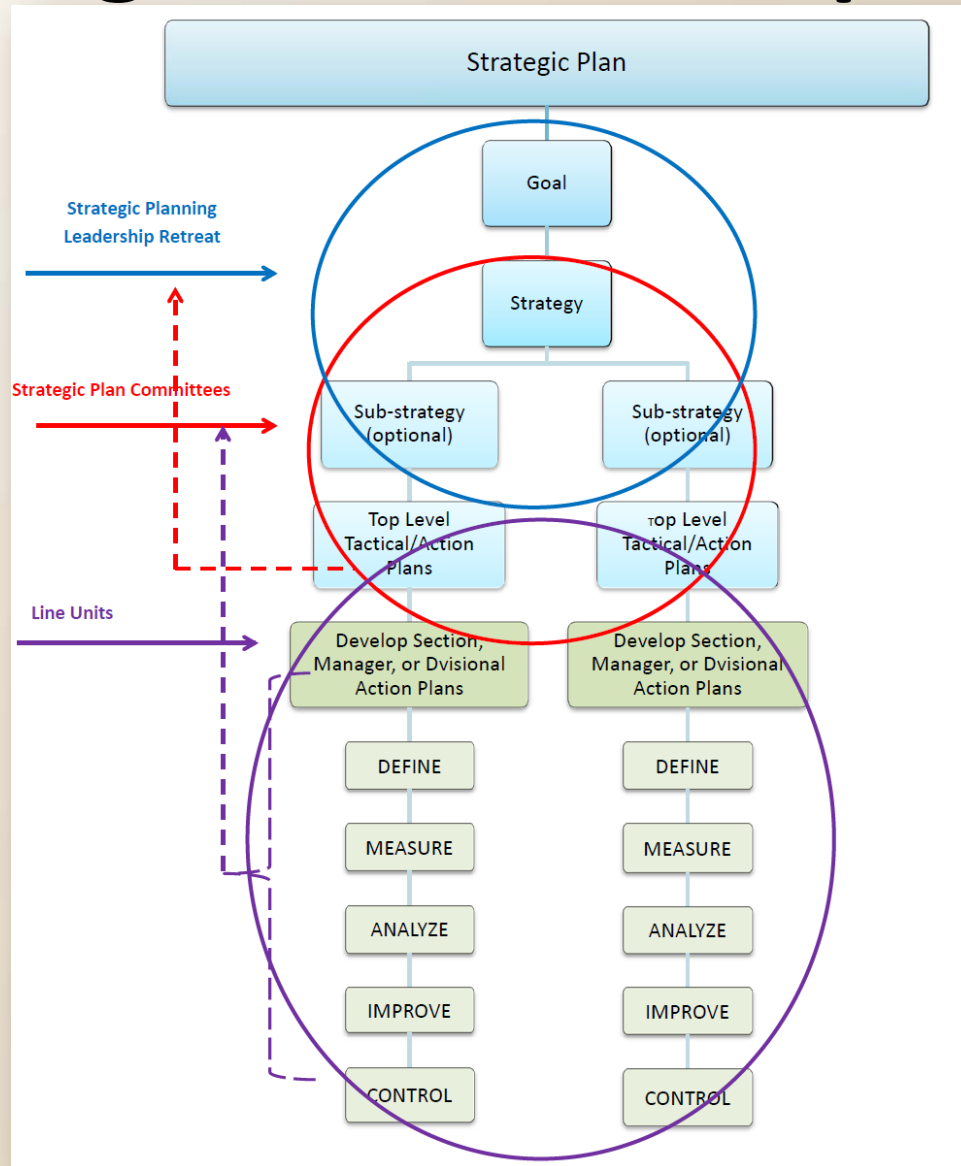
# of key competencies development (5 new competencies per Trainee by end of program)

% Satisfaction from Trainees, Senior Management (95% satisfaction rate)

\$ Invested per Trainee (less than \$1000 invested per Trainee)



# Strategic Plan Development







# Now What?

- **Line Unit Feedback to SP Committees**
- **SP Committees reconvene & review**
- **Director Final Approval**
- **Line Unit deploys using DMAIC (Step1-7)**
  - ❖ Form Teams
  - ❖ Feedback loop to SP Committee





# Tools for Line Unit Owners

- Consistent directories/folders on shared network
- DMAIC template for every Tactic
- Resources
  - ❖ Creating Cohesive & Effective Teams
  - ❖ QI Tools
  - ❖ Progress Reporting templates, calendar
  - ❖ Baldrige Winner Best Practices





# Key Elements of SP Management

- **Dynamic Functionality**
  - ❖ Internal/External scanning
- **Training/Education**
  - ❖ Line Unit Owners
  - ❖ PlanBase Users
  - ❖ External Partners
- **Engagement**
  - ❖ Physical Dashboard
  - ❖ Monthly electronic updates
  - ❖ M/V/V Posters

Status Key

	Not begun
?	Has Not Been reviewed
★	Ahead of Plan- Achieving significantly more than expected
○	On Track- Meeting expectations
⊗	Behind Plan- Achieving less than expected
●	Off Track- Encountering serious issues
➡	Change- Pursuing “as is” doesn’t make sense. Need change.





# Dynamic Functionality: Sweeping the Landscape





# PlanBase: Strategic Plan Software

base.com/hoshin/Statelab/Main.act?nextUrl=Home.act

**June '13 All Plans Status** [Show Deleted](#) [Printer Friendly](#) [Help](#)

Below is the status of all plans you can view. Links to more detail are provided.

Plan	Creation Status	Owner	Review Status		
1.0: Build a workforce environment conducive to high performance work <a href="#">plan</a> <a href="#">review</a> <a href="#">plan status</a> <a href="#">csv</a> <a href="#">edit</a>	●	Lorelei Kurimski <a href="#">✉</a>	?	?	?
2.0: Effectively engage customers and stakeholders to support organizational sustainability <a href="#">plan</a> <a href="#">review</a> <a href="#">plan status</a> <a href="#">csv</a> <a href="#">edit</a>	●	Lorelei Kurimski <a href="#">✉</a>	?	?	?
3.0: Enhance organizational focus on commitment to improvement, innovation, and sustainability <a href="#">plan</a> <a href="#">review</a> <a href="#">plan status</a> <a href="#">csv</a> <a href="#">edit</a>	●	Lorelei Kurimski <a href="#">✉</a>	?	?	?
4.0: Assure financial stability and establish priorities for improvement <a href="#">plan</a> <a href="#">review</a> <a href="#">plan status</a> <a href="#">csv</a> <a href="#">edit</a>	●	Lorelei Kurimski <a href="#">✉</a>	?	?	?
5.0: Be recognized as a state and national subject matter expert (SME) in public and environmental health laboratory science <a href="#">plan</a> <a href="#">review</a> <a href="#">plan status</a> <a href="#">csv</a> <a href="#">edit</a>	●	Lorelei Kurimski <a href="#">✉</a>	?	?	?

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**June '13 Plan Status 2.0: Effectively engage customers and stakeholders to support organizational sustainability**

**Report Settings**  
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Objective/Strategy	Creation Status	Owner	Review Status		
2.0: Effectively engage customers and stakeholders to support organizational sustainability <a href="#">plan</a> <a href="#">review</a>	●	Lorelei Kurimski <a href="#">✉</a>	?	?	?
2.1: Develop a system to assess customer satisfaction (including unmet needs). <a href="#">plan</a> <a href="#">review</a>	●	Lorelei Kurimski <a href="#">✉</a>	?	?	?
2.2: Develop proactive mechanism to provide outreach to customers. <a href="#">plan</a> <a href="#">review</a>	●	Lorelei Kurimski <a href="#">✉</a>	?	?	?

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# Questions?

Lorelei Kurimski

[lorelei-kurimski@uiowa.edu](mailto:lorelei-kurimski@uiowa.edu)

319/335-4979