



# **Illinois Public Health Association 2021-2025 Strategic Plan**

# Table of Contents

Executive Summary ..... 1  
Overview of Process ..... 3  
Vision/Mission..... 3  
Environmental Scan ..... 4  
Priorities ..... 4  
Goals, Objectives, Strategies ..... 5  
Linkage to SHIP ..... 5  
Putting Plan into Action..... 5

## Appendices

A. Glossary/Acronyms..... 6  
B. Timelines ..... 7  
C. Tools for Collecting Input..... 9  
D. SWOT ..... 14  
E. Goals Chart..... 17  
F. Goals Timeline..... 25



## **Illinois Public Health Association 2021-2025 Strategic Plan Executive Summary**

**Vision:** Optimal health for all Illinoisans achieved through a robust public health system.

**Mission:** IPHA will lead in the enhancement and support of the public health system and the practice of public health, focused on health equity and improved health throughout Illinois.

### **Strategic Goals**

**Goal 1: Increase advocacy capacity for the public health system.**

- Develop advocacy around impacting Social/Structural Determinants of Health
- Determine advocacy priorities of membership and collaborators/partners
- Educate legislators and legislative staff about the value of public health and the public health system
- Nimble respond to emerging issues impacting health through the development of policy responses

**Goal 2: Lead a movement that promotes policies and practices in Illinois that address health equity and racial justice with a focus on structural and social determinants of health.**

- Define and assess the current state of health equity, and cultural and racial justice
- Develop an organizational plan to address health equity, and cultural and racial justice
- Implement a plan, working in collaboration with membership and other partners including universities, businesses, private health care, and other sectors that impact public health
- Evaluate and revise the plan

**Goal 3: Enhance and expand partnerships and collaborations to promote the value and practice of public health.**

- Assess and engage a broader representation of statewide leadership
- Develop an infrastructure that links the components of the public health system and facilitates bidirectional decision-making/communication
- Support the implementation of SHA/SHIP

**Goal 4: Lead public health workforce development and recruitment.**

- Develop a system for the effective collaboration of existing workforce development resources
- Offer leadership development opportunities with a focus on skills-building on systems thinking, emerging issues, and the recommendations in PH3.0
- Provide and promote training on management and administrative skills, including governance, fiscal management, proposal writing, team-building, and performance management
- Support and foster the development of the future Public Health Workforce

**Goal 5: Enhance infrastructure for IPHA, its members, and public health in Illinois.**

- Strengthen IPHA internal infrastructure
- Strengthen IPHA membership infrastructure
- Market the value of public health
- Increase sustainability of the public health system

# **Illinois Public Health Association 2021-2025 Strategic Plan**

## **A. Overview of Process**

The Illinois Public Health Association has a history of developing and using strategic plans to guide its decision-making and direction. In 2019, a consultant was engaged to lead this process and a timeline was developed. A survey was shared with the IPHA Executive Council in January 2020 to collect feedback and suggestions for changes to the existing mission and vision. Interviews with seven key stakeholders were conducted by phone in February and March. A survey with questions on mission, strengths, weaknesses, opportunities, and threats was sent to IPHA management staff in February. The original process was to conduct a face-to-face meeting with the Executive Council to elicit input on strengths, weaknesses, opportunities, and threats and to collect input on actions from sections, partner organizations, staff, and members. In the middle of the process of collecting input, Coronavirus cases began to increase in Illinois. Those employed in the public health and health care sectors became focused on COVID-19 response and there was a statewide shelter-in-place order issued in mid-March. The consultant took the information collected by early March and drafted goals for input from the Executive Committee and Executive Council at the June meetings. Executive Council members would also be surveyed to collect input on possible objectives and strategies.

By May, it became apparent that a new approach was needed to complete the process. A panel of public health experts in Illinois was asked to serve as the IPHA Strategic Planning Committee (SPC) to complete the development of the plan. The Committee included: Tom Hughes and Jeffery Erdman from IPHA; Hana Hinkle, incoming president of IPHA; Christina Welter and Guddi Kapadia from P3RC — Policy, Practice and Prevention Research Center at UIC School of Public Health; Don Kauerauf, former assistant director of IDPH; Tracey Smith, from SIU School of Medicine; and Miriam Link-Mullison, consultant and former IPHA President. During the summer, the SPC refined the goals set forth and added objectives, strategies, and timelines. A rough draft of the goals, objectives, and strategies was shared with the Executive Council in September for feedback. During the fall, the SPC finalized the action plan and discussed implementation. The final draft document was shared with the Executive Council for feedback at the end of October. After final revisions from the Executive Council, the document was shared for adoption at the December Executive Council meeting.

## **B. Vision and Mission**

Using input from the Executive Council survey and stakeholder interview responses a new mission and vision statement were drafted. The vision and mission of IPHA were revised to place more emphasis on the public health system and health equity. The draft vision and mission statements received some changes from staff. The statements below were approved by the Executive Council on June 18, 2020.

**Vision: Optimal health for all Illinoisans achieved through a robust public health system.**

**Mission: IPHA will lead in the enhancement and support of the public health system and the practice of public health, focused on health equity and improved health throughout Illinois.**

### **C. Environmental Scan**

An environmental scan was conducted and information on the strengths, weaknesses, and external opportunities and threats were collected from IPHA management staff surveys and key stakeholders' interviews. Information that related to the SWOT was also gleaned from the executive council survey on mission and vision. The strengths identified were consistent across the groups providing input and included: advocacy and legislative issues, broad array of partners across the public health system, strong voice for public health, useful annual conference, large membership, and experienced staff. Areas to improve included: more effective marketing, more focused programming, more engagement across all academic public health programs, and more engagement from members and sections. Opportunities included: the need for more leadership, coordination, and training around health equity and the increased awareness of the value of public health from the COVID response. The many threats to IPHA focused around: funding for public health agencies and the association, and changes in the field of health care. The compiled responses are in Appendix D.

### **D. Summary of Strategic Priorities**

Based on the analysis of the environmental scan, four priorities were proposed and presented at the June Executive Council meeting. A decision was made after Executive Council input to add a separate priority related to health equity. The five priorities are:

- Maintain a strong advocacy program
- Advance health equity
- Enhance and expand partnerships and collaboration
- Enhance public health workforce recruitment and development
- Enhance infrastructure for IPHA and public health

As the committee looked at each priority/goal, the driving question was, "What is the role of IPHA related to this priority?" Based on the SWOT and discussions with staff, the committee took the perspective that the future of IPHA lies in three major functions within the public health system: advocacy, collaboration, and workforce development. Therefore, more emphasis was placed on IPHA's clear strengths of advocacy and policy development and collaboration across the broad public health system. Some of the aspects of the third function of workforce development were identified as strengths but this deserves more focus to ensure a robust public health system. These major roles are reflected throughout the strategic objectives and strategies.

## **E. Goals and Objectives (see Appendix E on page 17)**

## **F. Linkages with the State Health Improvement Plan (SHIP)**

This plan outlines the role IPHA would serve in supporting the dissemination and implementation of the State Health Improvement Plan. In addition, it identifies IPHA's role in policy development and support of the public health system in aligning with SHIP initiatives.

## **G. Putting the Plan in Action**

Distribution— The plan will be presented to and shared with the Executive Council and the membership. It will be a part of new Executive Council orientation materials. All sections and partner associations will be asked to share with their membership. The new vision and mission statements will be posted in the IPHA offices, on the IPHA website, and shared in appropriate documents. The action plan will also be posted on the website and a webinar for members will highlight the action plan.

Implementation— Goals and objectives will be used to drive decisions regarding association and section activities. New opportunities will be evaluated in relationship to the Strategic Plan Goals and whether these opportunities further the mission of IPHA. Staffing will be organized to support implementation of the plan and support the work of the sections and committees. Sections and committees will be organized to support implementation of the plan, forming new sections and committees as needed to ensure their activities are supportive of accomplishing plan goals.

Monitoring—The Executive Director and Section Chairs will report on strategic plan progress at Executive Council meetings.

Reassessing— The Strategic Plan will be reviewed at least annually with both staff and the Executive Council to reflect on progress and to determine the focus for the next year.

## Appendix A: Glossary/Acronym

**AmeriCorps** — IPHA-sponsored program of volunteers who are placed in public health agencies to build capacity.

**DHS** — Department of Human Services

**Executive Committee**—IPHA officers

**Executive Council** — IPHA governing body

**Executive Team**—IPHA management staff

**GPSI** — Graduate Public Service Internship

**Health Equity** — is when everyone has the opportunity to attain full health potential, and no one is disadvantaged because of social position or any other socially defined circumstance.

**HiAP** — Health in All Policies

**IAPHA** — Illinois Association of Public Health Administrators

**IDPH** — Illinois Department of Public Health

**IPHI** — Illinois Public Health Institute

**NIPHC** — Northern Illinois Public Health Consortium

**P3RC** — Policy, Practice and Prevention Research Center at UIC School of Public Health

**PSE** — Policy, System, Environment

**PHIST** —Public Health Is Stronger Together— a coalition of public health groups in Illinois

**Public Health System** — includes governmental agencies, community-based organizations, and academic programs, all focused on preventing disease, promoting health, and preparing for and responding to both acute (emergency) threats and chronic (ongoing) challenges to health. The public health system is the foundation for planning, delivering, evaluating, and improving public health.

**PH 3.0** — Public Health 3.0 refers to a renewed approach to public health that goes beyond traditional public health department functions and programs. This expanded mission of public health is to ensure the conditions in which everyone can be healthy.

**SDOH** — Social Determinants of Health

**SHA/SHIP/ICC** —State Health Assessment/ State Health Improvement Plan/ Implementation Coordination Council

**SIPHC** — Southern Illinois Public Health Consortium

**SPC** —Strategic Planning Committee

**SWOT** —Strengths, Weaknesses, Opportunities, and Threats

**UIC/SPH** — University of Illinois—Chicago/ School of Public Health

**WD** — Workforce Development



## Appendix B: Timelines

| <b>IPHA Strategic Plan Timeline (January 2020)</b> |  |  |
|--|--|--|
| <b>Month</b>                                       | <b>Task</b>  | <b>Who</b>   |
| January  | <ul style="list-style-type: none"> <li>-Finalize detailed timeline</li> <li>-Request additional background information</li> <li>-Executive Committee Call on 1/24</li> <li>identify key stakeholders</li> <li>finalize key stakeholder interview questions</li> <li>finalize survey for input on vision/mission</li> <li>-Send survey to Executive Council regarding vision/mission by 1/29 with responses due back by 2/11</li> <li>-Share survey with IPHA management based off stakeholder interview questions due back 2/11</li> </ul> | <p>Miriam<br/>Miriam/Tom<br/>Hana/Miriam</p> <p>Tom to assist with contacts<br/>Miriam/Tom</p> |
| February   | -Conduct key stakeholder calls to collect input on SWOT and compile  | Miriam   |
| March  | -On 3/18 9-12 meet with Executive Council to finalize mission/vision and collect info on strengths, weaknesses, opportunities, and threats   | Miriam   |
| April  | -Compile SWOT<br>-Identify strategic issues and finalize with the Executive Committee by conference call on.   | Miriam<br>Miriam/Hana  |
| May  | <ul style="list-style-type: none"> <li>-Develop survey for sections and associate membership to share strategic objectives and collect input on action items.</li> <li>-Finalize survey getting feedback from Executive Committee by email</li> <li>-Distribute survey</li> </ul>  | <p>Miriam</p> <p>Miriam</p> <p>IPHA staff</p>  |
| June   | -Share strategic objectives and get input on action items from:<br>Executive Council—June 18 board meeting;<br>IPHA staff—June meeting   | <p>Miriam</p> <p>Toni set time</p> <p>Tom set date and time</p>                                |
| June/July  | <ul style="list-style-type: none"> <li>-Draft plan with goals, objectives, timeline and who responsible</li> <li>-Seek feedback from Executive Council and staff by email.</li> </ul>  | <p>Miriam</p> <p>Miriam</p>  |
| August   | <ul style="list-style-type: none"> <li>-Finalize with Executive Council and discuss monitoring and reporting.</li> <li>-Develop final document draft.</li> <li>-Finalize final document</li> </ul>   | <p>Miriam/<br/>Tom/Toni</p> <p>Miriam</p> <p>IPHA staff</p>                                    |
| September  | -Plan presented and voted on by membership at the business meeting.  | Miriam/Toni  |

### **Timeline Revised as a Result of COVID 19:**

|             |  |
|-------------|--|
| January     | Finalize timeline, identify key stakeholders, and collect background information working with the Executive Committee by conference call.  |
| January     | Collect input from the Board on any needed changes to vision and mission —this would be done by emailed survey.  |
| Feb/March   | Collect information on strengths, weaknesses, opportunities, and threats from key stakeholders and board members. The key stakeholders will be interviewed by phone. There will be a face-to-face meeting with the board possibly in conjunction with the March Board meeting. |
| April       | Identify strategic issues and finalize with the Executive Committee by conference call. Pulled from existing input and drafted Vision, Mission, SWOT and Strategic Issues with some action items.  |
| May         | Recruit a Strategic Planning Committee. The committee will work with the consultant on a draft document and will be Tom Hughes, Jeffery Erdman, Hana Hinkle, Guddi Kapadia, Tracey Smith, Christina Welter, Don Kauerauf.  |
| June        | Share draft of vision, mission, SWOT, and Strategic Issues at the June 18 Executive Council Meeting. Invite input on Vision, Mission, and Strategic issues at meeting and follow up with survey to solicit input on goals and activities from Executive Committee.             |
| July/August | Solicit input from the Strategic Planning Committee on goals, objectives, and activities for the plan.   |
| September   | Share draft plan with goals, objectives, and activities; seek input on timeline and who is responsible at Executive Council meeting.   |
| Oct/Nov     | Meet with Strategic Planning Committee to finalize plan document, including timeline and who is responsible.   |
| December    | At Executive Council Meeting adopt the strategic plan for 2021-2025  |

## Appendix C: Tools for Collecting Input

- Survey for Executive Council on Mission and Vision
- Questions for Stakeholder Phone Interviews
- Survey for IPHA Executive Team
- Survey on Objectives and Activities for Executive Council

## IPHA Survey on Mission and Vision

A part of the process of developing a strategic plan for IPHA for 2021-2025 is revisiting the current mission and vision. Input is being sought from all Executive Council members. Please review the current statements, reflect on the questions provided. **Respond to Tom Hughes ([thughes@ipha.com](mailto:thughes@ipha.com)) by February 11.** The mission and vision statements will be finalized at the Executive Council meeting on March 18th.

**MISSION**—Mission statements should clarify the organization’s purpose and indicate why it is doing what it does. It should answer the question, “Ultimately, what are we here to do?” The mission statement speaks to what the organization does and why the organizations exists.

**Current IPHA Mission:** To improve health in Illinois through leadership in advocacy, education, and collaboration.

- Does it reflect who IPHA is, what the purpose is, what business IPHA is in, who is served and how IPHA is unique?
- How does IPHA’s role differ from other public health organizations in Illinois?
- Is this reflected in the mission?
- Is the current mission out of date? \_\_\_\_ no \_\_\_\_ yes If yes, how? \_\_\_\_\_
- What changes in the current mission would you propose?
- No changes are needed. \_\_\_\_

**VISION**—Vision statements share a futuristic view regarding the ideal state or conditions that the organization aspires to change or create.

**Current IPHA Vision:** A high-performing sustainable public health system in all areas of Illinois to achieve wellness and health equity.

- Does it reflect the future that IPHA is striving for?
- Does it reflect how those served will benefit from IPHA?
- Is IPHA’s role/mission reflected in this vision?
- Is the current vision out of date? \_\_\_\_ no \_\_\_\_ yes If yes, how?
- What changes in the current vision would you propose?
- No changes are needed. \_\_\_\_\_

**IPHA Strategic Plan 2021-2025**  
**Key Stakeholder Phone Interview**

Introduction:

Thank you for agreeing to talk to me. I am MLM, I am working with IPHA to develop a strategic plan for the association to cover 2021-2025. I have been a member of IPHA for many years and was the president 2015-2017. I have just a few questions and the interview should take 30-40 minutes.

1. How would you describe your (or your organization's) current relationship with IPHA?  
What value has been gained from this relationship?
2. What have been the major contributions IPHA has provided the public health system over the last 2 years?
3. What do you see as IPHA's main role or purpose within the public health system in Illinois?
4. What are some examples of activities in the last two years that demonstrate IPHA serving this main role or purpose?
5. What strengths does IPHA bring to the public health system in Illinois?
6. How might IPHA make better use of these strengths?
7. What could IPHA do more effectively to strengthen their organization and/or the overall public health system?
8. What external forces of change (opportunities or threats) will be impacting IPHA and its ability to serve the public health system over the next few years?
9. What key issues should IPHA address over next five years to achieve its purpose?
10. How could IPHA work with your organization to address these key issues?
11. Any final comments?

## **IPHA Executive Team —Strategic Plan 2021-2025 Survey**

As a part of the process of developing a strategic plan for IPHA for 2021-2025 input is being sought from IPHA Executive Team staff members. Please complete the following questions and share responses by February 11 to Miriam Link-Mullison ([5577mlm@gmail.com](mailto:5577mlm@gmail.com)). All IPHA staff will be given opportunities for input on the strategic plan in June.

1. What have been the major contributions IPHA has provided the public health system over the last two years?
2. What do you see as IPHA's main purpose within the public health system in Illinois?
3. What are some examples of activities in the last two years that demonstrate IPHA serving this main purpose?
4. What strengths does IPHA bring to the public health system in Illinois?
5. How might IPHA make better use of these strengths?
6. What could IPHA do more effectively to strengthen their organization and/or the overall public health system?
7. What external forces of change (opportunities or threats) will be impacting IPHA and its ability to serve the public health system over the next few years?
8. What key issues should IPHA address over next five years to achieve its purpose?

# Survey on Objectives and Activities

*We need your additional ideas and input to add detail to this strategic plan. What objectives and activities should be implemented over the next five years to meet the proposed goals? Please email your responses to Tom Hughes at [thughes@ipha.com](mailto:thughes@ipha.com) by July 10, 2020. Thank you!*

**Vision:** Optimal health for all Illinoisans achieved through a robust public health system.

**Mission:** IPHA will lead in the enhancement and support of the public health system and the practice of public health, focused on health equity and improved health throughout Illinois.

## Strategic Goals

### **Goal 1: Maintain a strong advocacy program that develops policy and champions legislation.**

#### Potential Objectives

- 1.1. Advocate for legislation and policies to improve health
  - Provide training for legislative staff on value of public health
  - Support increased access to health insurance
  - Develop policy statements on major health issues
- 1.2. Advocate for legislation and policies to improve public health practice
  - Initiate and support legislation to increase funding to governmental public health
- 1.3. Advocate for legislation and policies to promote health equity
  - Provide training and support for the application of HIAA

#### **1. What additional objectives and activities should be added?**

### **Goal 2: Enhance and expand partnerships and collaboration to promote value and practice of public health.**

#### Potential Objectives

- 2.1. Develop and expand partnerships with healthcare providers related to population health initiatives
  - Conduct pilot projects with MCOs on value of LHDs
- 2.2. Revitalize PHIST 2.0
  - Focus PHIST 2.0 initiatives to promote the value of public health to legislators, communities at-large, and the media.

#### **2. What additional objectives and activities should be added?**

### **Goal 3: Enhance workforce recruitment and development.**

#### Potential Objectives

- 3.1. Become hub for public health training and workforce development
  - Offer leadership development opportunities for association staff and LHDs including mentorship programs and training.
  - Support improved public health practice through the adoption of PH 3.0 concepts, funding for the focus on SDOH and health equity
  - Operationalize health equity and the dismantling of oppressive systems
  - Maintain and implement a statewide workforce development plan

- 3.2. Expand connections with universities
  - Develop a partnership with the public health program in each public university and the SIU-SOM Population Health Office
  - Expand student involvement in IPHA, LHDs, and public health practice
- 3.3. Address public health nurse shortage
- 3.4. Expand community health worker programs

**3. What additional objectives and activities should be added?**

**Goal 4: Enhance infrastructure for IPHA and public health in Illinois**

Potential Objectives

- 4.1. Increase sustainability of funding for governmental public health system and for association.
  - Diversify funding for IPHA by looking at other foundations and corporate sponsorships
  - Apply for large capacity grants and distribute funds related to strategic goals and PH3.0 initiatives
  - Maximize use of resources through streamlined processes
- 4.2. Enhance marketing for IPHA and public health system
  - Add marketing/public relations/development staff to better promote IPHA's services and secure additional grant funding and corporate dollars.
  - Develop and implement marketing plan for promoting IPHA.
  - Develop and implement a marketing toolkit for public health that focuses on the value of public health through stories of public health.
- 4.3. Strengthen membership engagement in IPHA
  - Have staff person responsible for overseeing membership recruitment, support and engagement based on a needs assessment of the public health workforce.
  - Invigorate sections through engagement with this strategic plan. Assist sections in implementing activities that are directed at strategic goals and objectives.
  - Provide more opportunities for remote involvement and networking.
- 4.4. Succession planning
  - Ensure a successful recruitment and transition of the IPHA Executive Director including capture and transfer of knowledge.

**4. What additional objectives and activities should be added?**

**Additional comments/suggestions regarding this plan:**

## Appendix D. Environmental Scan/SWOT Analysis Summary

### Strengths

#### Policy/Advocacy

- Sets policy agenda and advocates for PH with collaborative partners
- Strong reputation and leader in advocating for PH issues
- Effective advocacy for policy and legislation
- Strong relationship with governor's office and legislative staff
- Recognized leader in public health issues by Illinois General Assembly
- Coordinates advocacy on federal and national issues

#### Partnerships

- Strategic partner to members
- Provides a unified voice
- Strong collaboration and relationships with diverse partners
- Neutral broker/convener/weaver/lynchpin of PH sectors
- Facilitates communication across system

#### Practice

- Committed to improving health and safety
- Supports efforts in addressing prevention, educating public
- Passionate about public health
- Provides capacity-building and support to LHDs and ensures representation
- Bridges academic and practice organizations
- Leader in areas of HIV and immunization
- Provides outreach programs that impact Hispanic and African-born minority populations in the areas of breast cancer, lupus, and Hepatitis B and is service gap provider
- Grant hub to send money to LHDs and CBOs
- Interface with MCOs
- Expert technical assistance to LHDs and CBOs on billing
- Strong capacity in grant management
- Existing website, social media and other communication channels and ability to message on PH issues

#### Workforce Development

- Connection to students and coordinates AmeriCorps placements
- Promotion of community health workers as part of workforce
- Provides training on public health practice, PH 3.0
- Offers annual major conference which bridges academia and practice
- Offers many public health practice resources

#### Membership

- Membership organization with large membership
- Has a statewide focus and has members who represent larger PH community
- Affiliate of APHA

#### Infrastructure

- Staff experienced and knowledgeable staff in areas of:
  - Resource development, conference planning, and networking
  - Capacity-building, technical assistance, and public health programming



- Lobbyists and advocates that are well-connected in the public health system and government

## Weaknesses

### Marketing

- Could more effectively promote association
- Need to share successes of association more effectively
- Be more effective in sharing stories of PH

### Practice

- Spread across many issues
- Need more focus, cannot be everything to everyone
- Need to more effectively measure progress with metrics and share progress
- Need more balance in service provision versus supporting membership and public health system
- Need a better understanding of what PH system needs to be stronger
- Need to support local public health practice in PH 3.0 skills
- Provide more connection and leadership on PH issues for state agencies—share what the priorities are for LHDs
- Lack of public health funding for LHDs and PH 3.0 activities

### Workforce Recruitment and development

- Not all academic public health programs in state are engaged
- Shortage of PH nurses

### Membership

- Need to identify areas where membership needs to be expanded geographically and across disciplines, including a need for more presence in Chicago area
- Lack of engagement in Sections and Sections are under-utilized

### Infrastructure

- Staff are spread too thin
- Too reliant on grant funds
- Use of space by other groups is underutilized

## Opportunities

### Policy

- Capacity to set policy agenda and direction for PH system
- Maximize benefit of Pritzker administration and GA majority

### Partnership

- New hospital assessment and transformation with focus on wellness and population health with collection and redistribution of Medicaid dollars

### Practice

- Need for more leadership on health equity
- Collaborate with partners to address population health and SDOH
- Increase focus on SDOH and population health
- COVID-19 should be seen as a wake-up call for value of PH and need for funding infrastructure. COVID-19 illustrates value of science and public health and provides opportunities to fight stereotypes, focus education on all in this together—globalization; focus on need for community response and necessity to act together

## Membership

- Large membership which could be energized around issues
- Expand connections with universities

## Workforce development

- Could provide workforce development leadership on PH 3.0 and health equity

## Threats

### Funding threats

- Continued budget constraints at local level, affects membership and overall PH services
- State is tightening their rules to exclude certain fundamental expenses and make it more difficult to receive adequate funding
- Changes in governmental administration that do not support public health initiative
- Federal election
- Potential census undercount and loss of legislative district and public funding
- Workforce—leadership development
- Turnover of leadership at local health departments who may not be aware of IPHA and benefits
- Executive Director retirement
- Shortage of public health nurses

### Changes in Healthcare system

- Weakening of the Affordable Care Act and Medicaid coverage that will affect clients and the public health system in Illinois
- Hospital population health work that excludes LHDs
- MCOs not fully utilizing LHDs

Appendix E.

| Goal 1: Increase advocacy capacity for the public health system.                                    |  |   |                                     |   |   |
|---|--|---|-------------------------------------|---|---|
| Objectives  | Strategies   | Performance Indicators  | Time-line                           | Responsible Parties   | Budget Impacts  |
| 1.1 Develop advocacy around impacting Social/Structural Determinants of Health                      | A. Operationalize Health in All Policies<br><br>(a) Revise the Bill<br>(b) Adopt and model implementation at IPHA<br>(c) IPHA responsible for analyzing legislation for HiAP | Revised HiAP bill<br><br>HiAP Reviews                                   | 2022                                | Legislative IPHA Staff<br><br>Legislative Committee   | Staff time (analysis and ushering bill changes)   |
|   | B. Build capacity of public health and partners to institute policy, system, and environmental changes<br><br>C. Develop systems to tap into lived experiences               | PSE changes at local levels<br><br>Systems for collecting information   | 2021                                | Annual Conference Planning Committee<br><br>Executive Director and Sections   | Dedicated funds for the Annual Conference/Policy Institute<br><br>Communication Infrastructure/ Systems |
| 1.2 Determine advocacy priorities of membership and partners  | A. Annual review of priorities from partner organizations (National and State PH Associations) to inform IPHA legislative priorities   | IPHA legislative priorities   | Annually                            | IPHA, Members, Partners   | Meeting Costs= room, food, and materials*   |
|   | B. Establish ongoing processes for collecting priorities from membership and partners  | Finalized and implemented procedure for collecting input and addressing | Annually                            | IPHA, Members, Partners   |   |
| 1.3 Educate legislators and legislative staff about value of public health and public health system | A. Hold an annual training for legislative staff   | Number of staff trained   | Annually                            | IPHA Legislative Staff and Committee  | Legislative Contract  |
|   | B. Provide training on legislative process and advocacy  | Number of members trained   | Annually                            | IPHA Legislative Staff and Committee  | Meeting Costs *   |
|   | C. Increase education and communication with legislators by members  | Number of visits to legislators   | Annually                            | IPHA Staff collaboratively with partners  | Staff time  |
| 1.4 Nimble respond to emerging issues impacting health through the development of policy responses  | A. Develop policy statements, white papers, policies, draft policies, policy briefs (Gun Violence, BLM, Racism.)<br><br>B. Share policy recommendations                      | Policy documents produced and disseminated                              | Twice Annually and as issues emerge | Academic and Student Sections<br><br>Other sections as related to topic areas (Ex: Environmental Health Section)<br><br>Academic Partners | Student stipends<br><br>Graphic designer  |

## Goal 2: Lead a movement that promotes policies and practices in Illinois that address health equity and racial justice with a focus on structural and social determinants of health.

| Objectives   | Strategies  | Performance Indicators   | Time-line | Responsible Parties   | Budget Impacts  |
|--|---|--|-----------|---|---|
| <b>2.1 Define and assess current state of health equity, and cultural and racial justice.</b>      | <p>A. Activate Health Equity Section; formative trust building</p> <p>B. Partner with universities and other organizations</p> <p>C. Review existing efforts, what tools to use and why, how the process should go</p> <p>D. Assess membership and internally with a focus on policy, workforce needs and collaborative opportunities</p> <p>E. Develop and disseminate summary report</p>  | <p>Section activity</p><br><br><br><br><br><p>Final Report</p> | 2021      | <p>Executive Council, IPHA Health Equity Officer</p> <p>Health Equity Officer, Health Equity and Academic Sections</p> <p>Academic Section</p><br><br><p>IDPH Health Equity Council</p> | <p>Staff support for committees and sections</p> <p>Student stipends</p><br><br><p>Funds for outside health equity facilitator</p><br><p>Meeting costs *</p>    |
| <b>2.2 Develop an organizational plan to address health equity, and cultural and racial equity</b> | <p>A. Develop a plan focusing on policy, workforce development and collaboration aligned with the Illinois State Health Improvement Plan and other Illinois PH Agency plans</p> <p>B. Ensure that the plan is integrated across the association departments and divisions</p> <p>C. Identify actionable next steps to address equity.</p> <p>D. Through various levels of engagement, ensure membership is aware and have the opportunity to provide input and feedback</p> | Plan developed and disseminated                                | 2022      | <p>IPHA Health Equity Officer, Health Equity Section</p><br><br><p>IDPH Health Equity Council</p><br><p>Health Equity Section, Executive Council</p>                                    | <p>Staff support for committees and sections</p><br><br><p>Student stipends</p><br><p>Funds for outside health equity facilitator</p><br><p>Meeting costs *</p> |

| Objectives   | Strategies   | Performance Indicators  | Time-line | Responsible Parties   | Budget Impacts  |
|--|--|---|-----------|---|---|
| <b>2.3 Implement a plan working in collaboration with membership and other partners including academic, business, private healthcare and other sectors that impact public health</b> | A. Implement target policies to improve health equity<br>B. Provide workforce development opportunities focused on building PH 3.0 and equity skills<br>C. Partner with statewide groups addressing equity                       | Number of policies considered, approved, rejected<br>Number of partners trained<br><br>List of partners | 2023      | Health Equity Section, IPHA members<br>Workforce Development Committee<br><br>IDPH Health Equity Council, ICC of IL SHIP  | Staff support for committees and sections<br>Student stipends<br><br>Funds for outside health equity facilitator<br><br>Meeting costs * |
| <b>2.4 Evaluate the plan</b>   | A. Review progress and metrics annually internally and with full membership<br>B. Review engagement with partners<br><br>C. Facilitate annual Executive Council dialogue on progress, improvements, and growth as an association | Meeting minutes of Executive Council<br>Final assessment tool and reports<br>Meeting minutes            | 2023-25   | Health Equity Section, Executive Council<br>Executive Council<br><br>Health Equity Section and IPHA Health Equity Officer | Staff cost  |

## Goal 3: Enhance and expand partnerships and collaborations to promote the value and practice of public health.

|  | Strategies  | Performance Indicators   | Time-line                                    | Responsible Parties  | Budget Impacts  |
|--|---|--|--|--|---|
| <b>3.1 Assess and engage broader representation of statewide leadership</b>  | <p>A. Conduct IPHA internal review of current and emerging issues to identify potential new partnerships</p> <p>B. Engage partners through multiple communication venues</p> <p>C. Facilitate and enhance partnerships with healthcare providers related to population health initiatives</p> <p>D. Increase collaboration with a broader spectrum of state agencies (Example: DHS, other health associations, academic institutions)</p> | <p>List of new issues and partners</p> <p>Signed MOU/LOAs between new partners</p> <p>Signed MOU/LOAs between new partners</p> <p>Documents and presentations produced with new collaborators</p>  | Ongoing                                      | <p>Members of IPHA committees and sections</p> <p>Membership Coordinator</p> <p>Community Programs Coordinator</p> <p>Executive Director</p> | <p>Staff support for committees and sections</p> <p>Funding for Membership Coordinator</p> <p>Meeting Costs*</p>  |
| <b>3.2 Develop an infrastructure that links the components of the public health system and facilitates bidirectional decision-making/communication</b> | <p>A. Continue existing collaborations</p> <p>B. Convene the identified new partners to increase and facilitate communication and information sharing</p> <p>C. Develop and enhance platform for partners to increase communication and information exchange</p> <p>D. Focus current communication via newsletter and website on bidirectional communication and information exchange</p>   | <p>PHIST, IAPHA, NIPCH, SIPHC</p> <p>Meeting minutes</p> <p>Platform identification, implementation and or enhancements made to current systems.</p> <p>Changes made to newsletter and website</p> | Ongoing                                      | <p>Executive Director</p> <p>President, President-Elect</p> <p>Executive Director</p> <p>Associate Executive Director</p>                    | <p>Staff Time</p> <p>Meeting Costs*</p> <p>Marketing Costs</p> <p>Communication Platform Costs</p>  |
| <b>3.3 Support the implementation of SHA/SHIP</b>  | <p>A. Disseminate SHIP and progress of implementation/use</p> <p>B. Collaborate with partners to facilitate the alignment of local community strategies via training and resources</p> <p>C. Support development of policy and funding focused on SHIP health priorities</p>  | <p>SHIP related communication and trainings</p> <p>Policies aligned with priorities</p> <p>Funding aligned with priorities</p>   | <p>2021-25</p> <p>2021-22</p> <p>2022-25</p> | <p>Executive Director</p> <p>IDPH Staff</p> <p>UIC SPH/IPHI, Sections/Committees, Community Programs Coordinator</p>                         | <p>Staff Time</p> <p>Student Stipends</p> <p>Subcontracts with partners to support dissemination and implementation of SHIP with LHDs and other partners as appropriate</p> |

## Goal 4: Lead public health workforce development and recruitment in Illinois.

| Objectives   | Strategies   | Performance Indicators                                   | Time-line | Responsible Parties             | Budget Impacts                              |
|--|--|--|-----------|---------------------------------|---|
| <b>4.1 Develop a system for the effective collaboration of existing workforce development resources.</b>   | A. Assess training needs (aligned with SHIP, every three years)  | Assessment report  | 2021      | P3RC/RVPHTC (UIC SPH)           | Student stipend                             |
|  | B. Coordinate training across organizations and match effectively with needs                                       | Training opportunities developed, provided and or shared | 2021      | Workforce Development Committee | Training Platform/ Infrastructure           |
|  | C. Provide trainings to address urgent and emergent issues in public health  | Number trained   | 2021-25   | Community Programs Coordinator  |   |
|  | D. Support internal WD throughout the public health infrastructure   | Document support offered                                 | 2021-25   | Workforce Development Committee |   |
| <b>4.2 Offer leadership development opportunities with a focus on skills-building around systems thinking, emerging issues, and the recommendations from PH 3.0.</b>                   | A. Collaborate on the design and implementation of a leadership skills institute                                   | Policy/Leadership Institute developed and implemented    | Ongoing   | P3RC/RVPHTC (UIC SPH)           | Funding for the Policy/Leadership Institute |
|  | B. Focus on skills-building around working across the system   | Fellows/Team completed Policy/Leadership Institute       |           | Workforce Development Committee | Staff Costs                                 |
|  | C. Develop skills-building in policy development through data management and use                                   | Number trained in skills                                 |           | Community Programs Coordinator  | Meeting Costs*                              |
|  | D. Share best practices in leadership development  | Bets practices shared                                    | 2021      | Workforce Development Committee |   |
| <b>4.3. Provide and promote training on management and administrative skills including governance, fiscal management, proposal writing, team building, and performance management.</b> | A. Offer skills-based management trainings which address core competencies in management and administrative skills | Training offered and promoted                            | Ongoing   | P3RC/RVPHTC (UIC SPH)           | Training Platform/ Infrastructure           |
|  | B. Promote management training at a variety of venues  | Meeting Minutes  | 2021-25   | Workforce Development Committee | Meeting Costs*                              |
|  | C. Explore the opportunity for public health management certification  | Meeting Minutes  | 2024      | Community Programs Coordinator  | Communications Platforms                    |

| Objectives   | Strategies  | Performance Indicators  | Time-line      | Responsible Parties   | Budget Impacts   |
|--|---|---|----------------|---|--|
| <b>4.4 Support and foster the development of the future Public Health Workforce.</b> | <p>A. Develop a partnership with university public health programs and medical schools.</p> <p>B. Link students looking for internships with appropriate local public health opportunities.</p> <p>C. Offer webinars re: careers in public health at partner universities.</p> <p>D. Assist in the design and implementation of Student Scholars component to Leadership Skills Institute.</p> <p>E. Identify best practices around recruiting broadly diverse students, including gender identities</p> <p>F. Explore and expand public health post degree service programs such as AmeriCorps, GPSI, etc.</p> | <p>Number of universities engaged</p> <p>Number interns placed</p> <p>Number of webinars offered</p> <p>Number student scholars</p> <p>Document shared best practices</p> <p>Number of post degree placements</p> | <p>Ongoing</p> | <p>Academic &amp; Student Section</p> <p>P3RC (UIC SPH)</p> <p>Community Programs Coordinator</p> <p>Membership Coordinator</p> | <p>Staff Costs</p> <p>Student Stipends</p> <p>Meeting Costs*</p> |



## Goal 5: Enhance infrastructure for IPHA, its members, and public health in Illinois.

| Objectives   | Strategies   | Performance Indicators                   | Time-line | Responsible Parties  | Budget Impacts   |
|--|--|--|-----------|--|--|
| <b>5.1 Strengthen IPHA internal infrastructure</b>   | A. Assess the staff positions and skills needed in alignment with partners to execute the FULL plan successfully | Skill Assessment Report                  | 2021      | Executive Director, President, President-Elect                             | Funding to support staff education                                 |
|  | B. Develop staff skills to more effectively implement the strategic plan for the full SP timeframe.              | Performance evaluations                  |           | Executive Director   | Funding for systems including communication, training, and website |
|  | C. Develop technical infrastructure to support the implementation of the plan                                    | Technical infrastructure improvements    |           | Associate Executive Director   |  |
|  | D. Diversify funding beyond governmental public health sources in alignment with IPHA priorities and goals       | % of funding from non-government sources |           | IPHA Executive Team  |  |
|  | E. Conduct agency-wide succession planning, including sections and committees                                    | Succession plan                          |           | Executive Director, Executive Team, Executive Committee                    |  |
| <b>5.2 Strengthen IPHA membership infrastructure</b> | A. Assess which benefits are sought after by members/potential members   | Assessment results                       | 2021      | Membership Committee, Membership Coordinator, Associate Executive Director | Funding for position for membership oversight                      |
|  | B. Align sections and committees with strategic plan goals   | New organization chart                   |           | Executive Committee  |  |
|  | C. Assign a dedicated staff for membership development   | % FTE focused on membership              |           | Executive Director   |  |
|  | D. Enhance opportunities for online networking and engagement of members   | Number of engaged online                 |           | Membership Coordinator   |  |
|  | E. Explore strategic partnerships to build new opportunities for membership development and benefit              | Number of new benefits                   |           | Membership Coordinator, Executive Director                                 |  |

| Objectives   | Strategies   | Performance Indicators  | Time-line  | Responsible Parties  | Budget Impacts  |
|--|--|---|--|--|---|
| <b>5.3 Market the value of public health</b>                   | <p>A. Identify key marketing messages, target audiences (affiliate members and partnering organizations, funders)</p> <p>B. Develop a communication plan inclusive of existing methods such as ED newsletters and IPHA’s website as well as new methods such as social or earned media to:</p> <p>a. Share the revised goals of IPHA</p> <p>b. Share successes of IPHA, its members, and public health in Illinois</p> <p>C. Align communication campaigns with other partners with a focus on emerging issues</p> | <p>Number of key messages per target</p> <p>Written plan , communication products</p> <p>Communication campaigns on emerging issues</p>   | 2022 - 2025  | <p>Executive Director</p> <p>Associate Executive Director, Membership Coordinator</p> <p>Executive Director</p>  | <p>Marketing funds</p> <p>graphic designer</p> <p>Communications Platform</p> |
| <b>5.4 Increase sustainability of the public health system</b> | <p>A. Expand the education of funders on how to sustain and maintain a public health system</p> <p>B. Increase effective funding of governmental and non-governmental public health</p> <p>C. Utilize tangible crises to educate funders on PH importance</p> <p>D. Facilitate the development of an organizational structure which facilitates strategic partnerships in order to sustain a robust public health system</p> <p>E. Development of a PH Systems Committee</p>                                       | <p>Documents on recommended funding levels</p> <p>% of funding by source</p> <p>Crisis communications</p> <p>Presentations and support given to support partnerships</p> <p>PH System Committee minutes</p> | <p>2021</p> <p>Ongoing</p> <p>2022</p> <p>2021</p> | <p>Executive Director</p> <p>Associate Executive Director</p> <p>Executive Director and President</p> <p>Membership Coordinator</p> <p>President, PH Systems Committee Chair</p> | <p>Meeting Costs*</p> <p>Communications Platform</p>                          |

Appendix F.

| Illinois Public Health Association Strategic Plan 2021-2025 Timeline of Activity |  |            |            |            |            |            |            |            |            |      |      |      |
|--|--|------------|------------|------------|------------|------------|------------|------------|------------|------|------|------|
| Goals  | Strategy   | 2021       |            |            |            | 2022       |            |            |            | 2023 | 2024 | 2025 |
|  |  | Jan-Mar 21 | Apr-Jun 21 | Jul-Aug 21 | Sep-Dec 21 | Jan-Mar 22 | Apr-Jun 22 | Jul-Aug 22 | Sep-Dec 22 |      |      |      |
| Goal 1: Increase advocacy capacity for the public health system.                 | A. Operationalize Health in All Policies   |            |            |            |            | X          |            |            |            |      |      |      |
|  | (a) Revise the Bill  |            |            |            | X          |            |            |            |            |      |      |      |
|  | (b) Adopt and model implementation at IPHA   |            |            |            |            | X          | O          | O          | O          | O    | O    | O    |
|  | (c) IPHA responsible for analyzing legislation for HiAP  |            |            |            |            | X          | O          |            | O          | O    | O    | O    |
|  | B. Build capacity of public health and partners to institute policy, system, and environmental changes (T)                           |            |            |            | X          |            | O          |            | O          | O    | O    | O    |
|  | C. Develop systems to tap into lived experiences   | X          | O          | O          | O          |            |            |            |            |      |      |      |
|  | A. Annual review of priorities from partner organizations (National and State PH Associations) to inform IPHA legislative priorities |            |            |            | X          |            |            |            | O          | O    | O    | O    |
|  | B. Establish ongoing processes for collecting priorities from membership and partners (A)  | X          | O          | O          | O          | O          | O          | O          | O          | O    | O    | O    |
|  | A. Hold an annual training for legislative staff   |            |            |            | X          |            |            |            | X          | X    | X    | X    |
|  | B. Provide training on legislative process and advocacy (T)  |            | X          |            | O          |            | O          |            | O          | O    | O    | O    |
|  | C. Increase education and communication with legislators by members  |            |            | X          | O          |            |            | O          | O          | O    | O    | O    |
|  | A. Develop policy statements, white papers, policies, draft policies, policy briefs (Gun Violence. BLM. Racism.)                     | X          | O          | O          | O          | O          | O          | O          | O          | O    | O    | O    |
|  | B. Share policy recommendations  | X          | O          | O          | O          | O          | O          | O          | O          | O    | O    | O    |
|  | C. Disseminate policy products broadly and incorporate into advocacy agenda  |            | X          | O          | O          | O          | O          | O          | O          | O    | O    | O    |

| Goals   | Strategy   | 2021       |            |            |            | 2022       |            |            |            | 2023 | 2024 | 2025 |
|---|--|------------|------------|------------|------------|------------|------------|------------|------------|------|------|------|
|   |  | Jan-Mar 21 | Apr-Jun 21 | Jul-Aug 21 | Sep-Dec 21 | Jan-Mar 22 | Apr-Jun 22 | Jul-Aug 22 | Sep-Dec 22 |      |      |      |
| <b>Goal 2: Lead a movement that promotes policies and practices in Illinois that address health equity and racial justice with a focus on structural and social determinants of health.</b> | A. Activate Health Equity Section; formative trust building  |            | X          |            |            |            |            |            |            |      |      |      |
|   | B. Partner with universities and other organizations   |            | X          |            |            |            |            |            |            |      |      |      |
|   | C. Review existing efforts, what tools to use and why, how the process should go   |            | X          | O          |            |            |            |            |            |      |      |      |
|   | D. Assess membership and internally with a focus on policy, workforce needs and collaborative opportunities (A)  |            |            | X          | O          |            |            |            |            |      |      |      |
|   | E. Develop and disseminate summary report  |            |            |            | X          |            |            |            |            |      |      |      |
|   | A. Develop a plan focusing on policy, workforce development and collaboration aligned with the Illinois State Health Improvement Plan and other Illinois PH Agency plans |            |            |            |            | X          |            |            |            |      |      |      |
|   | B. Ensure that the plan is integrated across the association departments and divisions   |            |            |            |            |            | X          |            |            |      |      |      |
|   | C. Identify actionable next steps to address equity  |            |            |            |            |            |            | X          |            |      |      |      |
|   | D. Through various levels of engagement ensure membership is aware and have the opportunity to provide input and feedback  |            |            |            |            |            |            | X          | O          | O    | O    | O    |
|   | A. Implement target policies to improve health equity  |            |            |            |            |            |            |            |            | X    | O    | O    |
|   | B. Provide workforce development opportunities focused on building PH 3.0 and equity skills (T)  |            | X          |            | O          |            | O          |            | O          | O    | O    | O    |
|   | C. Partner with statewide groups addressing equity (ICC of IL SHIP)  |            | X          | O          | O          | O          | O          | O          | O          | O    | O    | O    |
|   | A. Review progress and metrics annually internally and with full membership  |            |            |            |            |            |            |            |            | X    | X    | X    |
|   | B. Review engagement with partners   |            |            |            |            |            |            |            |            | X    | X    | X    |
|   | C. Facilitate annual Executive Council dialogue on progress, improvements, and growth as an association  |            |            |            |            |            |            |            | X          | O    | O    | O    |

| Goals   | Strategy   | 2021       |            |            |            | 2022       |            |            |            | 2023 | 2024 | 2025 |
|---|--|------------|------------|------------|------------|------------|------------|------------|------------|------|------|------|
|   |  | Jan-Mar 21 | Apr-Jun 21 | Jul-Aug 21 | Sep-Dec 21 | Jan-Mar 22 | Apr-Jun 22 | Jul-Aug 22 | Sep-Dec 22 |      |      |      |
| <b>Goal 3: Enhance and expand partnerships and collaborations to promote the value and practice of public health.</b> | A. Conduct IPHA internal review of current and emerging issues to identify potential new partnerships (A)                      | X          |            |            |            | X          |            |            |            | X    | X    | X    |
|   | B. Analyze multiple communication venues used by partners (A)  | X          | O          | O          | O          | O          | O          | O          | O          | O    | O    | O    |
|   | C. Facilitate and enhance partnerships with healthcare providers related to population health initiatives                      |            | X          | O          | O          | O          | O          | O          | O          | O    | O    | O    |
|   | D. Increase collaboration with a broader spectrum of state agencies, Ex: DHS, other health associations, academic institutions |            | X          | O          | O          | O          | O          | O          | O          | O    | O    | O    |
|   | A. Continue existing collaborations  | X          | O          | O          | O          | O          | O          | O          | O          | O    | O    | O    |
|   | B. Convene the identified new partners to increase and facilitate communication and information sharing                        |            |            |            | X          |            | O          |            | O          | O    | O    | O    |
|   | C. Develop and enhance platform for partners to increase communication and information exchange (IT)                           |            | X          | O          | O          | O          | O          | O          | O          | O    | O    | O    |
|   | D. Focus current communication via newsletter and website on bi-directional communication and information exchange             |            | X          | O          | O          | O          | O          | O          | O          | O    | O    | O    |
|   | A. Disseminate SHIP and progress of implementation/use   | X          | O          | O          | O          | O          |            |            |            | O    | O    | O    |
|   | B. Collaborate with partners to facilitate the alignment of local community strategies via training and resources              |            | X          | O          | O          | O          | O          |            |            | O    | O    | O    |
|   | C. Catalyze the development and implementation of policy and funding focused on SHIP health priorities                         |            |            | X          | O          | O          | O          | O          | O          | O    | O    | O    |

| Goals  | Strategy   | 2021       |            |            |            | 2022       |            |            |            | 2023 | 2024 | 2025 |
|--|--|------------|------------|------------|------------|------------|------------|------------|------------|------|------|------|
|  |  | Jan-Mar 21 | Apr-Jun 21 | Jul-Aug 21 | Sep-Dec 21 | Jan-Mar 22 | Apr-Jun 22 | Jul-Aug 22 | Sep-Dec 22 |      |      |      |
| <b>Goal 4: Lead public health workforce development and recruitment in Illinois.</b> | A. Assess training needs (aligned with SHIP, every three years) (A)  |            | X          |            |            |            |            |            |            |      | X    |      |
|  | B. Coordinate training across organizations and match effectively with needs   |            |            | X          | O          |            | O          |            | O          | O    | O    | O    |
|  | C. Provide trainings to address urgent and emergent issues in public health (T)  |            |            |            | X          |            | O          |            | O          | O    | O    | O    |
|  | D. Support internal WD throughout the public health infrastructure   | X          | O          | O          | O          | O          | O          | O          | O          | O    | O    | O    |
|  | A. Collaborate on the design and implementation of a leadership skills institute                                       |            | X          |            |            |            | O          |            |            | O    | O    | O    |
|  | B. Focus on skills-building around working across the system (T)   |            | X          |            | X          |            | X          |            | X          | X    | X    | X    |
|  | C. Develop skills-building in policy development through data management and use (T)                                   |            | X          |            | X          |            | X          |            | X          | X    | X    | X    |
|  | D. Share best practices in leadership development  |            | X          |            | O          |            | O          |            | O          | O    | O    | O    |
|  | A. Offer skills-based management trainings which address core competencies in management and administrative skills (T) |            | X          | O          | O          | O          | O          | O          | O          | O    | O    | O    |
|  | B. Promote management training at a variety of venues  |            |            | X          | O          | O          | O          | O          | O          | O    | O    | O    |
|  | C. Explore the opportunity for public health management certification  |            |            |            |            |            |            |            |            | X    | O    | O    |
|  | A. Develop a partnership with university public health programs and medical schools                                    | X          |            |            |            | X          |            |            |            | X    | X    | X    |
|  | B. Link students looking for internships with appropriate local public health opportunities                            |            | X          |            | O          |            | O          |            |            | O    | O    | O    |
|  | C. Offer webinars re: careers in public health at partner universities (T)   |            | X          |            | O          |            | O          |            |            | O    | O    | O    |
|  | D. Assist in the design and implementation of Student Scholars component to Leadership Skills Institute                |            | X          |            | O          |            | O          |            |            | O    | O    | O    |
|  | E. Identify best practices around recruiting broadly diverse students, including gender identities                     |            | X          |            | O          |            | O          |            |            | O    | O    | O    |
|  | F. Explore and expand public health post degree service programs such as AmeriCorps, GPSI, etc.                        |            |            | X          | O          |            |            | O          |            | O    | O    | O    |

| Goals   | Strategy  | 2021       |            |            |            | 2022       |            |            |            | 2023 | 2024 | 2025 |
|---|---|------------|------------|------------|------------|------------|------------|------------|------------|------|------|------|
|   |   | Jan-Mar 21 | Apr-Jun 21 | Jul-Aug 21 | Sep-Dec 21 | Jan-Mar 22 | Apr-Jun 22 | Jul-Aug 22 | Sep-Dec 22 |      |      |      |
| <b>Goal 5: Enhance infrastructure for IPHA, its members, and public health in Illinois.</b> | A. Assess the staff positions and skills needed in alignment with partners to execute the FULL plan successfully  | X          |            |            |            | X          |            |            |            | X    | X    | X    |
|   | B. Develop staff skills to more effectively implement the strategic plan for the full SP timeframe  |            | X          | O          | O          |            | O          |            | O          | O    | O    | O    |
|   | C. Develop technical infrastructure to support the implementation of the plan   |            | X          | O          | O          |            | O          |            |            | O    | O    | O    |
|   | D. Diversify funding beyond grant and governmental public health sources in alignment with IPHA priorities and goals  |            |            |            | X          |            |            | X          |            | X    | X    | X    |
|   | E. Conduct agency-wide succession planning, including sections and committees   | X          |            |            |            |            |            | X          |            | X    | X    | X    |
|   | A. Assess which benefits are sought after by members/potential members (A)  |            |            | X          |            |            | X          |            |            | O    | O    | O    |
|   | B. Align sections and committees with strategic plan goals  |            | X          |            |            |            |            |            |            |      |      |      |
|   | C. Assign a dedicated staff for membership development  | X          | O          |            |            |            |            |            |            |      |      |      |
|   | D. Enhance opportunities for online networking and engagement of members (IT)   |            |            |            | X          |            |            | O          |            | O    | O    | O    |
|   | E. Explore strategic partnerships to build new opportunities for membership development and benefit   |            | X          |            |            |            |            |            | X          | X    | X    | X    |
|   | A. Identify key marketing messages, target audiences (affiliate members and partnering organizations, funders)  |            |            |            |            | X          |            |            |            |      |      |      |
|   | B. Develop a communication plan inclusive of existing methods such as ED newsletters and IPHA's website as well as new methods such as social or earned media to: |            |            |            |            | X          |            |            |            |      |      |      |
|   | a. Share the revised goals of IPHA  | X          |            |            |            |            |            |            |            |      |      |      |
|   | b. Share successes of IPHA, its members, and public health in Illinois  |            |            | X          | O          | O          | O          | O          | O          | O    | O    | O    |
|   | C. Align communication campaigns with other partners with a focus on emerging issues  |            | X          | X          | X          | X          | X          | X          | X          | X    | X    | X    |
|   | A. Expand the education of funders on how to sustain and maintain a public health system  |            |            |            | X          | O          | O          |            |            | O    | O    | O    |
|   | B. Increase effective funding of governmental and non-governmental public health  |            |            |            |            | X          |            |            |            | X    | X    | X    |
|   | C. Utilize tangible crises to educate funders on PH importance  | X          | O          | O          | O          | O          |            |            |            | O    | O    | O    |

| Goals   | Strategy   | 2021       |            |            |            | 2022       |            |            |            | 2023 | 2024 | 2025 |
|---|--|------------|------------|------------|------------|------------|------------|------------|------------|------|------|------|
|   |  | Jan-Mar 21 | Apr-Jun 21 | Jul-Aug 21 | Sep-Dec 21 | Jan-Mar 22 | Apr-Jun 22 | Jul-Aug 22 | Sep-Dec 22 |      |      |      |
| <b>Goal 5: Enhance infrastructure for IPHA, its members, and public health in Illinois.</b> | D. Facilitate the development of organizational structures which facilitate strategic partnerships in order to sustain a robust public health system |            |            |            |            |            | X          | O          |            | O    | O    | O    |
|   | E. Development of a PH Systems Committee   |            |            | X          | O          | O          | O          | O          | O          | O    | O    | O    |

X = new initiative O = ongoing A = member or partner assessment T = member training IT = IT infrastructure