



STRATEGIC PLAN 2022 – 2026

OUR MISSION:

Dedicated to strengthening the health, safety, and independence of Idahoans.



July 1, 2021



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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July 1, 2021

Dear Idahoans,

The Department of Health and Welfare (DHW) is dedicated to strengthening the health, safety, and independence of Idahoans. This is our mission, and it is the focus of our work each day.

The impact we have on those we serve is rewarding and often immeasurable. We work with underserved families to make sure they have a safe place to raise their children. We assist people in crisis, be it a physical or mental health crisis. We also help people access public assistance, while keeping those we serve on the path to self-reliance.

Since the start of the pandemic, DHW has provided transparent and reliable communications to Idahoans, has provided invaluable support to residents in need, and has been integral to the state's ongoing recovery including the distribution of the COVID-19 vaccine. DHW will continue to do all it can to inform, support, and protect Idahoans from COVID-19 for as long as the disease remains a threat to our public and personal health.

In addition to providing critical and necessary services to more than a third of all Idahoans, DHW is a vital partner to other agencies and communities in our state, both in leadership and supportive roles.

Our agency's 2022 – 2026 Strategic Plan highlights the path for us as we address state and community issues, as well as public health responses, with a vision coordinated with healthcare providers and partners. It is our timeline for meeting measurable objectives and delivering on our promises to better serve the people of Idaho. It aligns with the state's strategic plan, as well as to our state's values.

Each strategic objective represents critical work to be done. It represents a better future for those we serve. This message includes the highlights, but I encourage you to read the plan. Performance updates on each strategic goal and performance measure will be provided in a separate report later this year.

Our strategic goals are:

Goal 1: Ensuring affordable, available healthcare that works

- It is imperative that we, and others in the healthcare community, address the rising cost of healthcare. We remain focused on slowing the growth rate of healthcare spending, and we will be implementing strategies that limit year over year Medicaid growth on a per participant basis. We are also working to increase access to healthcare services in Health Professional Shortage Areas.

Goal 2: Protect children, youth and vulnerable adults

- We are focused on improving the ongoing care system by implementing plans for both the behavioral health system and the long-term care system for Idahoans with developmental disabilities. We are also dedicated to making sure children who have experienced abuse or neglect have safe, permanent homes.

Goal 3: Help Idahoans become as healthy and self-sufficient as possible

- We are committed to a future where Idahoans thrive because they have the resources that allow them to enjoy good health without medical intervention, and to recover from setbacks quickly. A future where poor health and crisis are not just treated but are prevented. We are continuing ground-breaking work in suicide prevention; an initiative focusing on Social Determinants of Health (SDOH) to reduce health disparities that disproportionately affect Idahoans in particular communities; and an initiative to positively impact lifelong outcomes for children by reducing the number of Adverse Childhood Experiences (ACEs).

Goal 4: Strengthen the public's trust and confidence in the Department of Health and Welfare

- We will deliver on our promises. By creating a customer-centric, innovative culture, and continuing a pro-active communications strategy, we will strengthen the public's trust in our vision, our mission, and our ability to support our fellow citizens. We will also implement a resource management strategy to reduce financial risk, and a strategy to enhance public health and safety by improving the efficiency and transparency of regulatory activities.

We will always remain true to our calling to public service. The people of Idaho who count on us fuel our compassion and drive us to be innovative in our services and programs. We are committed to helping those with substance use disorders achieve and maintain their recovery; making sure children live in safe, permanent homes; implementing a statewide plan for youth and their families who access the children's mental health system in Idaho; and developing prevention strategies that will have profound long-term effects on the future. We will continue to serve Idahoans so they can live their best lives. This plan is our guide.

Sincerely,



Dave Jeppesen
Director

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Each Objective in the Strategic Plan includes a measure for success. DHW also publishes data on a selection of these measures – called performance measures – in the DHW Performance Report, which is directly tied to the Strategic Plan. The report is reviewed by the Governor’s Office and the Legislature as part of the department’s budget approval process. The report also keeps Idahoans informed about our role in the community and the successes we have accomplished over the past year. By showing Idahoans and our partners how we manage our resources and meet our performance goals, we are demonstrating the value of the work we do.

Strategic Goal 1: Ensure affordable, available healthcare that works

Performance measures:

- Increase the percentage of Medicaid dollars that are paid under a value-based payment from 1 percent to 50 percent, by July 1, 2023.

Strategic Goal 2: Protect children, youth, and vulnerable adults

Performance measures:

- Improve time to permanency for children in foster care by 10 percent by July 1, 2023.
- Transform the behavioral healthcare system in Idaho for adults with serious mental illness and addiction by implementing five of the nine prioritized recommendations to improve the Idaho behavioral healthcare system as approved in the Idaho Behavioral Health Council strategic action plan, by July 1, 2024.
- Improve the Customer Effort Score baseline metric by 10 percent for the customer experience project, by July 1, 2024.

- Improve the children’s mental health system in Idaho by providing treatment and support to children, youth, and their families, evidenced by an increase in the number of children/youth whose functional impairment has improved upon completion of services from 30 percent to 50 percent, by June 30, 2024.
- Establish an effective long-term system of care for individuals with developmental disabilities who exhibit severe behaviors, by July 1, 2022.

Strategic Goal 3: Help Idahoans become as healthy and self-sufficient as possible

Performance measures:

- Reduce Idaho suicide deaths by 20 percent by 2025.

Strategic Goal 4: Strengthen the public’s trust and confidence in the Department of Health and Welfare

Performance measures:

- The department is developing a measure in SFY 2022 from the various objectives currently listed under Goal 4.

Our mission

Dedicated to strengthening the health, safety, and independence of Idahoans.

Our vision

Provide leadership for a sustainable, integrated health and human services system.

Our values

Integrity, high quality customer service, and compassion are the foundation for all department activities. A focus on these values will lead to success.

GOAL

1

STRATEGIC GOAL 1

Ensure affordable, available healthcare that works

Strategic Objectives

1.1

Increase the number of National Health Service Corps clinic sites by 12 percent by June 30, 2023.

1.2

By July 1, 2023, 50 percent of Medicaid payments will be tied to measurable outcomes of better health and cost-efficient care.

1.3

Limit Medicaid spending growth to a defined annual per member cost increase target through the implementation of cost-containment strategies by July 1, 2025.

GOAL 2

STRATEGIC GOAL 2

Protect children, youth, and vulnerable adults

Strategic Objectives

2.1

Ensure children who have experienced abuse or neglect have safe, permanent homes by increasing in-home safety services to prevent the entry of children into foster care by July 1, 2022 and improving children in foster care's time to permanency by 10 percent, by July 1, 2023.

2.2

Develop and implement a behavioral healthcare system in Idaho that provides the services that people need, when they need them through implementation of the YES implementation plan and the IBHC strategic action plan by July 1, 2024.

2.3

Establish a long-term system of care for individuals with developmental disabilities who exhibit severe behaviors by July 1, 2022.

GOAL 3

STRATEGIC GOAL 3

Help Idahoans become as healthy and self-sufficient as possible

Strategic Objectives

3.1

Reduce Idaho's suicide rate by 20 percent by 2025.

3.2

Address health disparities and the social determinants of health (SDOH) associated with the priority health issues (diabetes, obesity, injury, and behavioral health) by partnering with and investing in at least one high-risk community per year, through June 2024.

3.3

Implement three evidence informed initiatives that reduce harmful adverse childhood experiences (ACEs) in Idaho families by July 1, 2023.

STRATEGIC GOAL 4

Strengthen the public's trust and confidence in the Department of Health and Welfare

Strategic Objectives

4.1

Implement the use of plain language to improve the customer experience. Commitment to plain language will be measured by a Flesch Reading Ease Score of 60 or above and a Flesch-Kincaid Grade Level Score of 8th grade (or under). Plan should be in place by Dec. 31, 2021. The Office of Communications will commit to meeting these goals in 75 percent of reviewed and new material between Jan. 1, 2022, and Dec. 1, 2023.

4.2

Prevent the accumulation of costly, ineffective, and outdated regulations and reduce regulatory burden by collaborating with the public to review and simplify 100 percent of the department's administrative rule chapters by Dec. 31, 2025.

4.3

Secure, protect, and optimize the use of information entrusted to us by Idahoans, by defending our network against threats for both in-office and at-home workers, ensuring compliance requirements are met, protecting confidential data while ensuring only authorized access, controlling physical access to worksites, and maintaining a 100 percent annual completion rate for security awareness training for employees.

4.4

Build the trust of the media, employees, and other stakeholders through communication and messaging strategies that support our mission and vision, demonstrate successes, enhance engagement, and strengthen relationships. New public relations and communications strategies will be measured by the Earned Media Value (baseline to be established by Dec. 1, 2022), and will be increased by 5 percent by Dec. 1, 2024.

4.5

Implement a resource management strategy to reduce financial risk through the adoption of enterprise-wide, integrated best practices by June 30, 2024.

4.6

Enhance public health and safety by improving the effectiveness and visibility of specific regulatory activities by June 30, 2022.



GOAL
1

STRATEGIC GOAL 1
Ensure affordable, available healthcare that works

The department is committed to serving Idahoans by ensuring that:

- the growth of healthcare costs is slowed, and healthcare affordability is improved.
- care makes people healthier.
- care is based on quality, focusing on a positive patient experience.
- cost of healthcare and shortages are addressed so Idahoans in all areas of the state have access to needed healthcare services.

Performance Measures

The department reports on a selection of the measures from the Strategic Plan in the annual DHW Performance Report. We will know we have succeeded in our work toward Goal 1 when we:

- increase the percentage of Medicaid dollars that are paid under a value-based payment from 1 percent to 50 percent, by July 1, 2023.

Key external factors – the success of this goal depends upon:

- the engagement of stakeholders within the healthcare delivery system, and their participation in the evaluation, planning, and implementation of new strategies and approaches.
- the availability of providers in rural areas of Idaho.
- the willingness by patients and their families to actively participate in improving their own health.
- our continued partnerships with federal agencies.
- the availability of funding for incentive programs.



STRATEGIC GOAL 1

Ensure affordable, available healthcare that works

STRATEGIC OBJECTIVE 1.1

Increase the number of National Health Service Corps clinic sites by 12 percent by June 30, 2023.

Lead: Elke Shaw-Tulloch

Problem statement:

Idahoans in some areas of the state may not access needed healthcare services due to healthcare professional shortages and limited access points.

Objective Summary:

The cost of services and shortage of healthcare professionals may prevent individuals from accessing needed healthcare services. The department will work to improve Idahoans' access to healthcare by increasing the number of National Health Service Corps (NHSC) sites, expanding new site opportunities by submitting Health Professional Shortage Area (HPSA) applications for all qualifying areas, and implementing initiatives to attract and retain nurses and clinicians.

- Idaho has 257 NHSC sites that provide primary care, dental health, or mental health services.
- Nursing shortages, including Registered Nurses and Licensed Practical Nurses, exist statewide.
- All hospitals, long-term care, and assisted living facilities report ongoing and sporadic nursing vacancies from a lack of applicants.
- Currently, 95.4 percent of the state is designated as a federal HPSA for primary care.
- 94 percent of Idaho is designated as a HPSA for dental health.
- 100 percent of Idaho is designated as a HPSA for mental health.
- Idaho has 73.9 primary care physicians per 100,000 people, as compared to the national rate of 92.5 per 100,000, which ranks Idaho at 45th out of 50 states.

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STRATEGIC GOAL 1

Ensure affordable, available healthcare that works

STRATEGIC OBJECTIVE 1.1

Increase the number of National Health Service Corps clinic sites by 12 percent by June 30, 2023.

Shortage area designations are important because they serve as qualifiers for many healthcare resources. An area must have a HPSA designation before a clinic can apply to become a NHSC site. The NHSC designation supports healthcare access by offering a sliding fee scale for patients and loan repayment opportunities for providers. We will focus on increasing healthcare access points for underserved Idahoans by assuring that all qualifying shortage areas are designated and conducting outreach for clinics to become NHSC certified.

To apply for NHSC site certification, the clinic must be located in a federally designated HPSA. Once approved, the certified clinic must offer a sliding fee scale based on income for individuals at or below 200 percent of the federal poverty level. The clinic must also offer services at a nominal charge or no charge for individuals at or below 100 percent of the federal the poverty level.

By increasing the number of NHSC certified sites in the state, underserved Idahoans at or below 200 percent of the federal poverty level will have improved access to healthcare services.

Tasks:

1.1.1

Analyze 100 percent of the state not currently designated as Health Professional Shortage Areas (HPSAs) in primary care and dental health* to determine eligibility by Dec. 31, 2021 and submit applications for eligible areas by Mar. 31, 2022.

1.1.2

Develop and implement a nursing loan repayment program to help address the nursing shortages in rural communities by Dec. 31, 2022.

1.1.3

From Nov. 1, 2021, through Jan. 1, 2023, conduct outreach to 100 percent of clinics in newly designated HPSAs within 60 days of designation, to provide education about NHSC site certification opportunities and benefits.

*Currently, 4.6 percent of Idaho's area is undesignated in primary care and 6 percent in dental health.

STRATEGIC OBJECTIVE 1.2

By July 1, 2023, 50 percent of Medicaid payments will be tied to measurable outcomes of better health and cost-efficient care.

Lead: Elizabeth Kriete

Problem statement:

Medicaid providers are currently incentivized to maximize healthcare treatment (e.g., triage care, and/or unnecessary treatments), rather than preventative healthcare. Under a fee for service healthcare delivery system, providers are paid more when they provide more services, not for delivering a higher quality of care. Providers are being paid for services that may be inefficient or that do not contribute to better health outcomes.

Objective Summary:

The Division of Medicaid's mission is to pay for better health. Today, we pay for many medical procedures, community-based services, and supports for people with disabilities, but few if any payments are directly linked to actual health outcomes for the people we serve. Generally, healthcare providers are paid more when they do more, not for delivering quality care. Providers want to do the right thing and deliver high-quality care, but our current financial model is not structured to support this goal. By restructuring Medicaid payments to hold providers accountable for costs and quality, we can reward healthcare providers who do better and deliver on our mission.

Tasks:**1.2.1**

Complete implementation of a statewide value-based payment program in SFY 2022 and prepare a preliminary report on program implementation to include cost-efficiency and quality performance metrics for SFY 2022 by Dec. 31st, 2022.

1.2.2

Work with value care organizations, contractors, and stakeholders to add the Medicaid Expansion population to the Healthy Connections Value Care program by July 1, 2022.

1.2.3

By Dec. 2021, develop contract language for duals plans that sets a reporting structure and goal for expansion of value based payment under those plans over the course of contract year 2022.

1.2.4

Establish a Medicaid quality workgroup that will get input from partners within and outside the department to set meaningful quality metrics and goals for Medicaid value-based, managed care, and fee for service programs by Dec. 31st, 2021.



STRATEGIC GOAL 1

Ensure affordable, available healthcare that works

STRATEGIC OBJECTIVE 1.3

Limit Medicaid spending growth to a defined annual per member cost increase target through the implementation of cost-containment strategies by July 1, 2025.

Lead: Elizabeth Kriete

Problem statement:

If Medicaid funding needs exceed overall growth in state revenues, the state will be in the difficult position of either pulling funding from other state programs or increasing taxes to fund Medicaid.

Objective Summary:

To address this problem of Medicaid funding needs, the Division of Medicaid will begin tracking and targeting a rate of per member per year¹ (PMPM) growth. The target will be to achieve a growth rate that does not exceed a pre-set benchmark in alignment with state tax revenue growth.

The Medicaid team will use the target as a benchmark for cost containment activities. The benchmark will also be used as a yardstick for funds available to meet needs for provider rate increases and operational expenses.

Future efforts to limit costs include further developing our strategies in the following areas:

- Value Based Payment (Healthy Connections Value Care)
- Managed Care Program Cost-Containment (Duals Managed Care Plans, Idaho Behavioral Health Plan, and dental and transportation managed care contracts)
- Utilization Management strategies for medical care quality

Tasks:

1.3.1

By Dec. 31, 2021, identify a data-driven per member per year cost-containment target and modify the Medicaid budget report to track progress towards that target.

1.3.2

By Jan. 1, 2022, implement contract changes focused on improved member care at lower cost for the duals plans to generate \$5M in reduction of the year-over-year growth trend for CY2022.

1.3.3

By July 1, 2022, implement new utilization management strategies to limit the use of low value, medically unnecessary services with the goal of cost-avoiding \$5M in SFY 2023.

¹Some growth in Medicaid funding is not easily controlled without changing state or federal law. Medicaid is an entitlement program that guarantees benefits to qualifying individuals. When more or fewer individuals qualify due to changes in income, disability status, or other factors outside of the control of the program, Medicaid expenses will increase or decrease accordingly. For this reason, Medicaid expenses are best considered on a per member basis to account for changes in the number who qualify for the program over time.



GOAL
2

STRATEGIC GOAL 2

Protect children, youth, and vulnerable adults

The department is committed to serving Idahoans by ensuring that:

- all children who have experienced abuse or neglect have safe and permanent homes, as quickly as possible.
- adults with serious mental illness and addiction receive services within a comprehensive behavioral healthcare system.
- individuals with developmental disabilities who exhibit severe behaviors receive services that are person centered, trauma informed, and delivered in the least restrictive environment possible.
- we improve the treatment and support provided to children and youth with functional impairment, and to their families.

Performance Measures

The department reports on a selection of the measures from the Strategic Plan in the annual DHW Performance Report. We will know we have succeeded in our work toward Goal 2 when we:

- improve time to permanency for children in foster care by 10 percent by July 1, 2023.
- transform the behavioral healthcare system in Idaho for adults with serious mental illness and addiction by implementing five of the nine prioritized recommendations to improve the Idaho behavioral healthcare system as approved in the Idaho Behavioral Health Council strategic action plan, by July 1, 2024.
- improve the Customer Effort Score baseline metric by 10 percent for the customer experience project, by July 1, 2024
- establish an effective long-term system of care for individuals with developmental disabilities who exhibit severe behaviors, by July 1, 2022 improve the children’s mental health system in Idaho by providing treatment and support to children, youth, and their families, evidenced by an increase in the number of children/youth

whose functional impairment has improved upon completion of services from 30 percent to 50 percent, by Jun 30, 2024.

Key external factors – the success of this goal depends upon:

- the availability of behavioral health professionals in rural and urban settings.
- behavioral health provider priorities and practice patterns.
- resources available in local communities to support individuals with chronic mental illness or substance use disorders.
- economic and social factors contributing to family crises, which can result in abuse and neglect of children and vulnerable adults.
- our continued partnerships with federal agencies.
- changes in federal requirements or federal funding.

STRATEGIC OBJECTIVE 2.1

Ensure children who have experienced abuse or neglect have safe, permanent homes by increasing in-home safety services to prevent the entry of children into foster care by July 1, 2022 and improving children in foster care's time to permanency by 10 percent, by July 1, 2023.

Lead: Cameron Gilliland

Problem Statement:

Idaho lacks a comprehensive statewide evidenced based service continuum for children and families served by the child welfare system.

Objective Summary:

This strategic objective is to ensure children and their families have access to services that meet their needs. Expanding both the quality and quantity of services will enable more children to remain safely in their own homes. For children entering foster care, increased quality and quantity of services that heal trauma can either expedite a return home or help create stability in a permanent placement. Movement to permanency is important particularly for very young children given their developmental needs, and for youth in congregate care as youth thrive best within family settings.

This objective is focused on strengthening processes within the Child Welfare Program to ensure:

- Children are only removed from their homes when the safety issues cannot be effectively managed with an in-home safety plan.
- Children who have been removed from their homes for their safety are returned to their families as soon as safety concerns have been addressed in the home.
- When it is not possible to safely return children to their families, children are placed in a timely manner with a family who can meet their lifelong needs through adoption or guardianship.
- Children ages 0-3 are prioritized for expedited permanency.
- Children are only placed in residential treatment settings when these settings are necessary to meet their specific treatment needs.
- Children who have been placed in residential treatment settings are able to return to their families as soon as their treatment needs are met.
- The program achieves a 10 percent increase of in-home safety cases by July 1, 2022.
- The program achieves a 10 percent decrease in the number of children coming into care following an in-home safety case by July 1, 2024.

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STRATEGIC OBJECTIVE 2.1

Ensure children who have experienced abuse or neglect have safe, permanent homes by increasing in-home safety services to prevent the entry of children into foster care by July 1, 2022 and improving children in foster care's time to permanency by 10 percent, by July 1, 2023.

TASKS:

2.1.1

Implement an intensive standardized in-home case management structure in each region by Jan. 31, 2022.

2.1.2

Develop at least three well-supported evidence-based services, for in-home and foster care cases, in the North, West, and East Hubs by Jan. 1, 2023.

2.1.3

Implement a family risk assessment tool that identifies needed planning and/or service provisions to be delivered through in-home prevention case management, by Mar. 31, 2023.

2.1.4

Designate at least six Idaho facilities as Qualified Residential Treatment Programs (QRTP) by Oct. 1, 2022 in order to ensure youth, whose needs are best met in a short-term non-family placement, are receiving quality trauma-informed care.

2.1.5

Implement targeted interventions to improve staff retention in the Child Welfare Social Worker II classification to above 80 percent by June 30, 2022, and above 85 percent by June 30, 2023.

STRATEGIC GOAL 2

Protect children, youth, and vulnerable adults

STRATEGIC OBJECTIVE 2.2

Develop and implement a behavioral healthcare system in Idaho that provides the services that people need, when they need them through implementation of the YES implementation plan and the IBHC strategic action plan by July 1, 2024.

Lead: Ross Edmunds

Problem Statement:

Idaho's current behavioral healthcare services are not structured in a system to maximize the potential effectiveness of the services to meet the diverse needs Idahoans with behavioral health conditions.

Objective Summary:

This objective is to develop a comprehensive behavioral healthcare system in Idaho. This transformation has been occurring for years. Now, the department is working with a broad stakeholder team (Idaho Behavioral Health Council). Additionally, the Youth Empowerment Services (YES) team is developing an updated implementation plan in response to the Jeff D lawsuit. Together, these efforts will result in a statewide, comprehensive strategic plan for Idaho's behavioral health system. The plan advances the work Idaho has been doing to improve the behavioral healthcare system, through initiatives such as the development of crisis centers, implementation of new housing models, and securing better funding to serve corrections populations. Many of the necessary pieces of a strong system are in place, but the development and implementation of this plan will organize those components into a structured, systematic approach to behavioral healthcare delivery in Idaho for children, youth, and adults with serious emotional disturbance, serious mental illness, and substance use disorders.

TASKS:

2.2.1

The department will lead the implementation of five of the nine prioritized recommendations to improve the Idaho behavioral healthcare system as approved in the Idaho Behavioral Health Council strategic action plan, by July 1, 2024.

2.2.2

The department will complete implementation of the YES implementation plan to improve the children's mental health system of care as measured by an improvement of the Child and Adolescent Needs and Strengths assessment (CANS) score from 30 percent to 50 percent, by July 1, 2023.

2.2.3

The department will organize a service system between children's mental health, Medicaid, and child welfare programs, as directed by [HB233](#), to support families trying to access children's mental health services and avoid referral to the child welfare program as a result of advocating for these services, by Dec. 31, 2021.

2.2.4

Develop and implement a better service coordination system for Idahoans with developmental disabilities and mental illness to improve customer experience as measured by the establishment of a Customer Effort Score (CES), by Dec. 1, 2022, and improvement of the Customer Effort Score by 10 percent by July 1, 2024.

2.2.5

The department will work with stakeholders to implement a 9-8-8 system/behavioral healthcare crisis line to provide access to emergency behavioral healthcare services to Idahoans experiencing a behavioral health crisis, by July 1, 2022.

STRATEGIC OBJECTIVE 2.3**Establish a long-term system of care for individuals with developmental disabilities who exhibit severe behaviors by July 1, 2022.**

Lead: Cameron Gilliland

Problem Statement:

The developmental disability system in Idaho is lacking in services for individuals with acute and subacute needs. Additionally, current provider capacity does not allow for individuals with complex behavioral, mental health, or medical needs that result in severe behaviors to receive care in the community.

Objective Summary:

Some individuals who have a Developmental Disability (DD) have complex behavioral, mental health, or medical needs that result in severe behaviors and prevent them from receiving care in the community. For these individuals, it is essential that they receive services that are person-centered, trauma-informed, and delivered in the least restrictive environment possible.

Meanwhile, safety for clients and the community must be maintained. This strategic objective will implement a treatment model to ensure that individuals with the most complex behavioral needs and significant behaviors in the state receive the appropriate treatment, whether they are living at a treatment center, in the community, or are transitioning from a center back into the community.

Upon the recommendation of Idaho stakeholders sitting on the Southwest Idaho Treatment Center Advisory Board, Idaho's system of services for individuals with DD and complex needs is transitioning from a long-established Intermediate Care Facility, to a system of care covering crisis, stabilization, and transition services. This system will effectively enable people to continue living in the community when they can be served there safely. Alternatively, when treatment must occur outside of the community, the system will serve individuals through an effective assessment and stabilization setting. Another component of the system is longer-term step-down treatment that will work on skills residents need to eventually live in the community. Finally, this system will include provider capacity building within the community to serve individuals who have severe autism or significant medical needs.

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STRATEGIC OBJECTIVE 2.3**Establish a long-term system of care for individuals with developmental disabilities who exhibit severe behaviors by July 1, 2022.**

A cross-divisional department project team has been established to develop the new treatment model for individuals with DD and complex needs. Sponsorship of the project comes from the Divisions of Behavioral Health, Medicaid, Family and Community Services, and Licensing and Certification. Under their direction, the implementation of the new treatment model will require significant policy and operational work on the following three prongs:

1. Assessment Observation and Stabilization Unit
2. Step-Down Treatment
3. Community Provider Capacity Development

Tasks:**2.3.1**

Assign cross-divisional resources needed to implement the policy and system design elements by Sept. 1, 2021.

2.3.2

Implement communications plan with staff and key stakeholders to build support for initial implementation by Nov. 1, 2022.

2.3.3

Launch new treatment model design elements by Jan. 1, 2022.

2.3.4

Present budget request to fund the new treatment model to the 2022 legislature by Mar. 1, 2022.



GOAL
3

STRATEGIC GOAL 3

Help Idahoans become as healthy and self-sufficient as possible

The department is committed to serving Idahoans by ensuring that:

- the suicide rate in Idaho is reduced.
- Idahoans become as healthy and self-sufficient as possible as a result of community-driven, place-based health initiatives.
- there is a measurable reduction in abuse, neglect, and other damaging adverse childhood experiences in Idaho families.

Performance Measures

The department reports on a selection of the measures from the Strategic Plan in the annual DHW Performance Report. We will know we have succeeded in our work toward Goal 3 when we:

- reduce Idaho suicide deaths by 20 percent by 2025.

Key external factors – the success of this goal depends upon:

- the amount of financial resources appropriated to deliver services.
- our continued partnerships with federal agencies.
- changes in federal requirements.
- forming new partnerships with Idaho funders.
- dispelling the myths about the reasons people die by suicide.
- the willingness of healthcare providers to become certified to treat addiction.
- the availability of illicit opioids in the state, such as heroin and fentanyl.
- the impact of COVID-19 on the economic viability of community programs, on the physical and mental health of Idahoans, and on the accessibility of community and mental health support
- economic and social stress that impacts families and increases risk for adverse childhood experiences

STRATEGIC OBJECTIVE 3.1**Reduce Idaho's suicide rate by 20 percent by 2025.**

Lead: Elke Shaw-Tulloch

Problem Statement:

Idahoans in serious emotional distress do not receive community-wide, comprehensive support due to the fragmented mental healthcare system.

Objective Summary:

Everyone has a role in suicide prevention and intervention. The department, in collaboration with the Idaho Suicide Prevention Action Collective (ISPAC) and the Idaho Council on Suicide Prevention (ICSP) have participated in the development of a suicide prevention strategic plan and annual action plan aimed at reducing suicides by 20 percent by 2025. This statewide collaborative effort engages multiple sectors to create a public/private collective to address suicides across the state.

The first area of focus is on training and education. In SFY 2021, the department and partners trained more than 25,000 Idahoans on the identification of signs of suicide and how to refer individuals to suicide care. Following this work, the department will work with partners to implement a Zero Suicide care model, which is based on the realization that people experiencing suicidal thoughts and urges often fall through the cracks in a sometimes fragmented health care system. It is a system-wide approach to improve outcomes and close gaps through guidance including readings, tools, and multimedia.

The second area of focus is to support the Idaho Suicide Prevention Plan activities on postvention strategies, which help support communities to reduce suicide contagion.

The department's Suicide Prevention Program will, in partnership with its stakeholders, implement multi-year strategies to:

- Develop healthy and resilient individuals, families, and communities.
- Develop and implement intervention, preventive services, and postvention supports to communities across the state.
- Continue to fund youth suicide prevention.
- Continue to fund the Idaho Suicide Prevention Hotline.
- Implement health system based universal screening, intervention, and follow up for suicidal patients.
- Address gaps in data research and evaluation of suicide in Idaho.

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STRATEGIC GOAL 3

Help Idahoans become as healthy and self-sufficient as possible

STRATEGIC OBJECTIVE 3.1

Reduce Idaho's suicide rate by 20 percent by 2025.

TASKS

3.1.1

Work toward a 3-year implementation of a Zero Suicide care model initiative by recruiting a cohort of Zero Suicide providers by June 30, 2022.

3.1.2

Create and monitor postvention goals in each local health district using the Idaho suicide postvention toolkit, which supports the Idaho Suicide Prevention Plan, by June 30, 2022.

STRATEGIC OBJECTIVE 3.2

Address health disparities and the social determinants of health (SDOH) associated with the priority health issues (diabetes, obesity, injury, and behavioral health) by partnering with and investing in at least one high-risk community per year, through June 2024.

Lead: Elke Shaw-Tulloch

Problem Statement:

The social determinants of health contribute to health disparities within Idaho communities.

Objective Summary:

In the United States, more is spent on healthcare than in any other developed country, yet health outcomes in nearly every indicator rank the U.S. below comparable countries.¹ Consequently, Americans experience worsening trends in life expectancy, infant mortality, and chronic conditions than our peers around the world. Poor health outcomes such as obesity, diabetes, heart disease, suicide, illicit drug use, youth violence, social isolation, and mental health issues are intrinsically linked to the underlying social and economic conditions in which people are born, grow, live, work, and age. These drivers of health outcomes are known as the social determinants of health (SDOH) and include factors such as poverty, unemployment, education, housing, social support, and the physical environment, as well as access to care. Having a healthy quality of life is determined more by these social and environmental factors than by medical care alone.

The Centers for Disease Control (CDC) and Prevention developed the Social Vulnerability Index (SVI) to identify higher risk communities based on selected social determinants of health. In addition to using the CDC's SVI to identify higher risk communities, the division tracks the SDOH measures used to calculate SVI to better understand the factors contributing to significant health challenges Idahoans face. In Idaho:

- 44 percent of children enrolled in public schools were eligible for free or reduced-price lunch.
- 45 percent of renters and 17 percent of homeowners, or 153,000 households, were considered cost burdened or severely cost burdened.²
- 11.2 percent of Idahoans lived in poverty.³
- As housing becomes less affordable, homelessness among Idaho schoolchildren has increased.
- 12.8 percent of Idahoans were without health insurance.³

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¹<http://www.debeaumont.org/about-us>

²US Census Bureau. American Community Survey 5-year Estimates: DP04 Selected Housing Characteristics 2014-18. The US Census Bureau defines "cost burdened" as people who pay more than 30 percent of household income on housing; and define "severely cost burdened" as people who pay more than 50 percent of household income on housing.

³US Census Bureau. QuickFacts – Idaho; United States. Available at: <https://www.census.gov/quickfacts/fact/table/ID.US/PST045219>. Accessed May 12, 2021.

STRATEGIC OBJECTIVE 3.2**Address health disparities and the social determinants of health (SDOH) associated with the priority health issues (diabetes, obesity, injury, and behavioral health) by partnering with and investing in at least one high-risk community per year, through June 2024.**

Get Healthy Idaho (GHI): Building Healthy and Resilient Communities is the Division of Public Health's statewide health improvement plan. Through GHI, the division supports initiatives that address SDOH within communities that positively impact health priorities. Over the next four years the division's health priorities are:

- Behavioral health
- Diabetes
- Overweight and obesity
- Unintentional injury
 - Specifically, motor-vehicle accidents, falls, and accidental poisoning/drug overdose

The vision of GHI is a future where healthy people live and thrive in safe, healthy, and resilient communities that focus on supporting place-based initiatives that positively impact the social determinants of health. The mission of GHI is to create the conditions that ensure all people can achieve optimal health and resiliency.

The strategies the department will engage in to achieve this mission include identifying high-priority communities; cultivating partnerships and capacity; achieving a shared vision; empowering a community-led approach; and investing in community-level approaches to impact social determinants of health such as housing, neighborhood conditions, and education.

In Jan. 2021, the Division of Public Health established the internal infrastructure needed to support this work including identifying multiple funding sources to establish the new braided funding model and awarding its first community subgrant. Additionally, the division identified the following population health metrics associated with the four health priorities that will be reviewed on a quarterly basis:

- Percent of Idaho adolescents who are obese or overweight
- Percent of young adults (18-25 years) in Idaho who report three or more Adverse Childhood Experiences (ACEs)

The Get Healthy Idaho initiative will be expanded to support the action plan for the current funded community into year two and to identify one more high-risk community to fund. Additionally, the department, in collaboration with the Health Quality Planning Commission will develop a Healthy Idaho Places Index (HIPI). The HIPI will be a rich source of data that combines the social determinants of health and Idaho's existing health outcomes to identify highest-risk communities (including neighborhoods) that need support. The HIPI will also serve as a driver for health policy decisions and resource dedication across state partnerships.

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STRATEGIC OBJECTIVE 3.2

Address health disparities and the social determinants of health (SDOH) associated with the priority health issues (diabetes, obesity, injury, and behavioral health) by partnering with and investing in at least one high-risk community per year, through June 2024.

TASKS:

3.2.1

Support the awarded community to identify social determinants of health indicators that will inform and drive the community health action plan, by July 31, 2021.

3.2.2

Publish an evaluation report on the progress of GHI work, measuring one or more community-level health indicators, by Aug. 31, 2021.

3.2.3

Award second high-risk community and execute new subgrant by Oct. 1, 2021.

3.2.4

Establish partnerships with the Idaho Funders Network and other agencies to support community needs by June 30, 2024.

3.2.5

Create a plan to identify and develop the Healthy Idaho Places Index (HIPI) by Oct. 1, 2021.

3.2.6

Complete the initial phase of the Healthy Idaho Places Index (HIPI) by Jan. 1, 2022.

3.2.7

Launch the Healthy Idaho Places Index by June 30, 2022.

STRATEGIC OBJECTIVE 3.3**Implement three evidence informed initiatives that reduce harmful adverse childhood experiences (ACEs) in Idaho families by July 1, 2023.**

Leads: Elke Shaw-Tulloch

Problem Statement:

Trauma experienced during childhood severely increases the likelihood of poor physical and mental health throughout life.

Objective Summary:

Success in the department's mission to strengthen the health, safety, and independence of Idahoans includes not just helping when people are in need, but also helping to prevent needs when possible. Adverse Childhood Experiences (ACEs) are connected to both poor behavioral health and physical health outcomes. By engaging with other family-serving programs and providers to implement programs that support families and children in Idaho, we can have a long-lasting, positive impact on the health, safety, and independence of Idahoans.

In state fiscal year 2020, the department worked with the Idaho Children's Trust Fund (ICTF) to develop trauma-informed, human-centered ACEs screening guidelines for physicians. Six focus groups were conducted to understand perceived barriers to physicians conducting ACEs screening and learn how the ACEs screening process could be administered in a way that makes patients feel safe and supported. ICTF staff created a parent advisory committee to help guide the project and started working with St. Luke's Health System to create provider training addressing solutions to perceived barriers.

In the next state fiscal year, the department will work with ICTF to conduct a pilot to test implementation of the new guidelines. The pilot will inform additional provider trainings by St. Luke's, and the ICTF will recruit and work with a cohort of providers in the Treasure Valley to integrate the new guidelines into their practice. The department will also initiate a data project to better understand the impact of ACEs on department supported clients.

TASKS:**3.3.1**

Implement a learning collaborative with medical providers to increase screening for ACEs to interrupt the intergenerational transmission of ACEs within families by Oct. 1, 2021.

3.3.2

Integrate the new screening guidelines into provider practices in the Treasure Valley by Sept. 30, 2022, with a plan to expand beyond the Treasure Valley in coming years.

3.3.3

Develop a data plan that brings together all DHW ACEs-related data to provide a clearer picture of ACEs impacting DHW population by June 30, 2022.



GOAL
4

STRATEGIC GOAL 4

Strengthen the public's trust and confidence in the Department of Health and Welfare

The department is committed to serving Idahoans by ensuring that we:

- improve our communication with Idahoans by reducing government jargon and writing in plain language.
- reduce the regulatory burden on the public imposed by our administrative rules.
- secure and protect the sensitive information entrusted to us by Idahoans.
- proactively communicate with the public to share how our work consistently improves the lives of Idahoans in need.
- reduce financial risk through the adoption of enterprise-wide, integrated best practices.
- protect vulnerable Idahoans through an improved criminal history background check system.
- improve public transparency of department regulatory activities so Idahoans are aware of the benefits of regulatory services to their health and safety

Performance Measures

The department reports on a selection of the measures from the Strategic Plan in the annual DHW Performance Report. We will know we have succeeded in our work toward Goal 4 when we:

- increase the Earned Media Value by 10 percent by Dec. 1, 2024.

Key external factors – the success of this goal depends upon:

- legislative buy-in and availability of resources to develop new ways of approaching the services the department provides.
- access to external innovations that can be leveraged.
- budget to support a measurement metric.
- additional demands on staff due to COVID-19 communications priorities.
- the public perception of regulation in Idaho.

STRATEGIC OBJECTIVE 4.1

Implement the use of plain language to improve the customer experience. Commitment to plain language will be measured by a Flesch Reading Ease Score of 60 or above and a Flesch-Kincaid Grade Level Score of 8th grade (or under). Plan should be in place by Dec. 31, 2021. The Office of Communications will commit to meeting these goals in 75 percent of reviewed and new material between Jan. 1, 2022, and Dec. 1, 2023.

Lead: Kelly Petroff

Problem statement:

Idahoans often find that our external communication materials use government jargon and are not written in language appropriate for the target audience.

Objective Summary:

The use of plain language in customer-facing communication channels and collateral will improve the customer experience. When information is available in plain language, readers:

- Understand documents more quickly.
- Make fewer calls for explanations.
- Make fewer errors filling out forms.
- Comply more accurately and quickly with requirements.

The use of plain language is important in communicating with those we serve because:

- They will not always understand what we do or our processes.
- They will base their opinions of us on many things including how we communicate with them.

Using the language our customers use will help improve understanding of services and programs, increase engagement, and build the trust that Idahoans have in DHW.

Tasks:**4.1.1**

Develop and begin implementation of an internal process to review, edit, and re-write customer facing documents in plain language (simple and concise, understanding the audience and the words they use, using short sentences, and avoiding jargon or unnecessary words) by Dec. 1, 2021.

4.1.2

Develop a plain language guide and internal training materials for divisions, website administrators, and communications professionals by Dec. 1, 2021.

STRATEGIC OBJECTIVE 4.2

Prevent the accumulation of costly, ineffective, and outdated regulations and reduce regulatory burden by collaborating with the public to review and simplify 100 percent of the department's administrative rule chapters by Dec. 31, 2025.

Lead: Tamara Prisock

Problem Statement:

Excessive regulation at all levels of government can impose high costs on businesses and can inhibit economic growth.

Objective Summary:

Excessive regulation at all levels of government can impose high costs on businesses and can inhibit economic growth. In Jan. 2019, Gov. Brad Little signed Executive Order 2019-02, titled the "Red Tape Reduction Act." The act requires state agencies that have authority to issue administrative rules to identify at least two existing rules to be repealed or significantly simplified for every new rule they propose, reducing the total number of words as well as the total number of restrictive words.

In Jan. 2020, Gov. Little signed Executive Order 2020-01: Zero-Based Regulation. The intent of this executive order is to institutionalize the process Idaho underwent in 2019, where agencies must justify every regulation that they want to keep in effect. The executive order also requires every rule chapter in effect to be reviewed by the agency according to a five-year schedule. This process will enable businesses and the public to engage in meaningful input on rules being reviewed.

We will measure our progress in further reducing the regulatory burden by completing the required review of 13 rule chapters in 2022, tracking the full implementation of each new requirement

in the Zero-Based Regulation Order, as well as the decreases in the overall number of words in administrative rule chapters and in the number of restrictive words, such as "must," "shall," "required," "prohibited" and "may not."

TASKS:**4.2.1**

In collaboration with each division tasked with rewriting a rules chapter, develop a department report on plans to conduct one of the following pairs of meetings: two (2) negotiated rulemakings meetings, two (2) public hearings, or one (1) of each, and identification of which months the notices will be published in the Idaho Administrative Bulletin by Dec. 31, 2021.

4.2.2

Collaborate with divisions with chapters due for review in 2022 to complete negotiated rulemaking requests and prospective analyses by Feb. 15, 2022, to be published in the Idaho Administrative Bulletin in May 2022.

4.2.3

Collaborate with divisions with chapters due for review in 2022 to complete the required full prospective analyses, Rule Initiation Forms (RIFs), and Cost-Benefit Analyses (if required) by mid-May, 2022.

4.2.4

Starting Mar. 2022, collaborate with divisions to review the sections of Idaho Code authorizing the rule chapters due for review and rewrite in 2023 to identify any changes required to support the 2023 review and rewrite of those chapters.

4.2.5

In collaboration with the Rules Unit and divisions seeking changes to Idaho Code sections in order to support the rules review in 2023, complete required legislative idea forms by May 31, 2022.

STRATEGIC OBJECTIVE 4.3:

Secure, protect and optimize the use of information entrusted to us by Idahoans, by defending our network against threats for both in-office and at-home workers, ensuring compliance requirements are met, protecting confidential data while ensuring only authorized access, controlling physical access to worksites, and maintaining a 100 percent annual completion rate for security awareness training for employees.

Lead: Andrew Masters

Problem statement:

The department must secure and protect highly sensitive customer information from loss or compromise, while making the most effective use of technology ensuring staff productivity is optimized.

Objective Summary:

To accomplish our work to help Idahoans in need, agency operations frequently involve the use of highly sensitive information. The department places high priority on appropriate and effective use, as well as securing and protecting this information. Information entrusted to the department includes confidential records, protected health information (PHI), personally identifiable information (PII), Federal Tax Information (FTI), Social Security identifiers, and financial account information.

This strategic objective provides a comprehensive four-pronged approach to the use of and protection of information. It involves:

- Adoption of cybersecurity and physical controls which provide protection at network and facility levels, while ensuring mobile workers' computers are set up at the necessary and appropriate security level.
- Continuous improvement of the department's technology posture through the regular examination and review of costs, utilization, and redundancies.
- Best practices in privileged account management, which ensures confidential data can only be access by authorized staff.
- Security awareness training, which helps employees recognize and prevent security breaches.

This four-pronged approach provides for optimization of technologies used, strong protection against unauthorized access to information, and the minimization of risks of data breaches that could result in harm to Idaho citizens, loss of federal funding, financial penalties, and damage to the department's credibility.

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STRATEGIC OBJECTIVE 4.3:

Secure, protect and optimize the use of information entrusted to us by Idahoans, by defending our network against threats for both in-office and at-home workers, ensuring compliance requirements are met, protecting confidential data while ensuring only authorized access, controlling physical access to worksites, and maintaining a 100 percent annual completion rate for security awareness training for employees.

TASKS:**4.3.1**

Optimize Technology Cost and Utilization for Health & Welfare by reducing or eliminating at least 60 percent of redundant or unused technologies by June 30, 2022.

4.3.2

Identify full depth of features in currently deployed technologies by Dec. 31, 2021, and implement use of 80 percent of additional valuable capabilities by June 30, 2022.

4.3.3

Ensure technology licensing contracts are optimized for the needs of the department by negotiating 100 percent of licensing terms, such as duration and cost, by June 30, 2022.

4.3.4

Establish and implement technology standards and governance model to ensure technology resources are optimized, by 9/30/2021.

4.3.5

Improve DHW staff efficiency by collaborating across divisions to develop and implement a user centric DHW technology dashboard by Dec. 31, 2021.

STRATEGIC OBJECTIVE 4.4

Build the trust of the media, employees, and other stakeholders through communication and messaging strategies that support our mission and vision, demonstrate successes, enhance engagement, and strengthen relationships. New public relations and communications strategies will be measured by the Earned Media Value (baseline to be established by Dec. 1, 2022), and will be increased by 5 percent by Dec. 1, 2024.

Lead: Kelly Petroff

Problem Statement:

Idahoans have a tendency to misunderstand the work and distrust information coming from state government organizations.

Objective Summary:

The department's Office of Communications will develop and implement pro-active communication strategies for all audiences to build affinity for DHW and an understanding of our work. Target audiences include the media, general public, taxpayers, legislators, customers, healthcare providers, community organizations, the DHW board, the Governor's Office, DHW employees, and other partners.

All communications strategies are focused on narratives that define DHW as compassionate and trustworthy and highlight successes of programs and initiatives. Narratives are shared through internal channels, video, blog, social media, the department website, and the media. All communications strategies are designed to position the department as fully transparent to, and supportive of, all we serve and those to whom we are accountable. Additionally, the Office of Communications will:

- Continue periodic communications to key stakeholders and customers.
- Engage more effectively with community organizations through a community engagement framework and strategy.
- Continue development of thought leadership strategies.
- Continue building internal culture via branded and inclusive internal communications strategies.
- Continue review and implementation of plain language into all communications materials.
- Write in plain language.

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STRATEGIC OBJECTIVE 4.4

Build the trust of the media, employees, and other stakeholders through communication and messaging strategies that support our mission and vision, demonstrate successes, enhance engagement, and strengthen relationships. New public relations, marketing, and communications strategies and activities will be measured by the Earned Media Value (baseline to be established by Dec. 1, 2022), and will be increased by 10 percent by Dec. 1, 2024.

TASKS:**4.4.1**

Develop training materials to help DHW employees better engage with the media, improve internal communications, and adhere to branding guidelines. Training materials to be developed by June 1, 2022.

4.4.2

Develop and implement media relations strategies including an online DHW Press Room (to include headshots, bios, etc. of senior leadership team); a DHW overview course for members of the media; and a primer about submitting a public records request. DHW will establish a Customer Effort Score by surveying local media representatives by June 1, 2022, and improve the baseline score by 5 percent by Dec. 1, 2024.

4.4.3

Develop an influencer strategy from the organizational assessment of community organizations that DHW supports, funds, or sponsors, and begin implementation of a strategy to engage these community organizations connected to DHW programs or mission by July 1, 2022.

4.4.4

Develop and implement an editorial calendar to support division program and services messaging, health-related communications, and department communications efforts. Through an internal survey to key stakeholders, the Office of Communications will measure helpfulness, quality, efficiency/timeliness, and teamwork to establish baseline scores for the Office of Communications. The editorial calendar to be developed by Dec. 1, 2021, and the survey to be completed by June 1, 2022.

4.4.5

Promote transparent, cross-divisional work and support among DHW employees to staff and the public through monthly "Living Strategic Plan" communications, through June 30, 2022. This project will be a collaboration between the Office of Communications and the Division of Management Services.

4.4.6

Establish a DHW photo library that features division-specific photos, Idaho photos, and other photos that all DHW communications professionals can access and integrate into their collateral materials, by Dec. 31, 2022.

4.4.7

Establish and begin implementation of a newsletter strategy that supports the programs and services and aligns with our various audiences (employees, customers, providers). The strategy should be developed by June 1, 2022.

STRATEGIC OBJECTIVE 4.5**Implement a resource management strategy to reduce financial risk through the adoption of enterprise-wide, integrated best practices by June 30, 2024.**

Lead: Brad McDonald

Problem Statement:

To improve the customer experience within our department and minimize the effect of adverse economic changes on those we serve in the community, we must continuously improve our strategic planning, financial planning/oversight, performance metric management, and enterprise-wide processes.

Objective Summary:

The department's mission statement is to be an organization that is "Dedicated to strengthening the health, safety, and independence of Idahoans." Resources – including people, money, and physical assets – are the lifeblood necessary to bring the mission statement to reality. This strategic objective includes the following resource management projects

- Re-thinking processes and enhancing transparency among department leaders in the procurement of goods and services.
- Developing a long-term facilities plan generated by cross-division collaboration, which can flex with changing environmental conditions.
- Capitalizing on updated Enterprise Resource Planning (ERP) systems (i.e., Luma) opportunities to modernize the department's resource-related reporting and planning tools.

TASKS:**4.5.1**

Financial contingency planning: Using their SFY22 budget distributions, divisions will start a spending evaluation to address how they would reduce general fund spending by 5 percent in the event of a financial emergency without significantly effecting public services. These internal plans will be due to the executive leadership team by Dec. 1, 2021.

4.5.2

Develop a comprehensive value-based department-wide plan for a regularly occurring review of all contracts by July 1, 2022.

4.5.3

Enhance all resource tools and communications distributed to and used by the organization's key stakeholders (including state agencies such as the Division of Financial Management the Department of Administration, and the Legislative Services Office; and other stakeholders such as the DHW Board, our Division Administrators, and our Executive Leadership Team) by July 1, 2022.

4.5.4

Ensure DHW is fully ready to implement the statewide Enterprise Resource Planning (ERP) functions (i.e, Luma) when the Human Capital Management, Payroll, Financial Management, and Procurement modules go live in Fiscal Year 2023.



STRATEGIC GOAL 4

Strengthen the public's trust and confidence in the Department of Health and Welfare

STRATEGIC OBJECTIVE 4.6

Enhance public health and safety by improving the effectiveness and visibility of specific regulatory activities by June 30, 2022.

Leads: Tamara Prisock and Brad McDonald

Problem Statement:

Growth in Idaho's population and the COVID-19 pandemic have resulted in the need to improve the department's performance in completing criminal history background checks for individuals who provide services to vulnerable people, and in completing required inspections of licensed health care facilities and services. Also, the performance of the department's regulatory activities is not always visible enough to help Idahoans see the benefits of those activities.

Objective Summary:

The department's regulatory activities are aimed at two important outcomes:

Being Safe: Performing regulatory activities that lead to improved health and safety.

Feeling Safe: Making the results of regulatory activities visible to the public so that Idahoans feel safer.

A key determinant of government effectiveness is how well regulatory systems achieve their policy objectives. Equally important is how well regulators communicate the benefits to overall public health and safety that result from their work.

Some of the major regulatory activities carried out by the department include criminal history background checks and inspections of licensed health care providers and residential care facilities. These activities help ensure that the citizens being served remain safe and receive high quality care.

In 2020, the COVID-19 pandemic interrupted the department's regulatory activities through stay-at-home orders that decreased the number of regular inspections conducted during the year. The department also faced increased challenges in promptly completing required criminal history background checks.

The department will improve safety by developing and executing plans to complete inspections that were not completed in 2020. The department will also develop and execute plans for more promptly completing criminal history background checks. We will measure our progress by monitoring the decrease in the number of overdue inspections as well as monitoring the length of time it takes to complete criminal history background checks.

The department will increase the visibility of key regulatory activities by adding them to reports developed for legislators and Idaho citizens.

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STRATEGIC GOAL 4

Strengthen the public's trust and confidence in the Department of Health and Welfare

STRATEGIC OBJECTIVE 4.6

Enhance public health and safety by improving the effectiveness and visibility of specific regulatory activities by June 30, 2022.

TASKS:

4.6.1

By Dec. 31, 2021, perform a thorough evaluation of Criminal History processes and develop a strategy to implement improvements to reduce the time it takes to complete background checks.

4.6.2

By June 30, 2022, leverage federal grant funds to perform process improvement and project management to implement a long-term sustainable Criminal History Background Check system.

4.6.3

By Aug. 30, 2021, work with the department's Communications Team to identify the department publications to which we will add data related to key regulatory activities.

4.6.4

By Sept. 30, 2021, develop and execute a plan aimed at completing at least 25 percent of the inspections that were not able to be completed during 2020 due to COVID-19 restrictions.

4.6.5

By Dec. 31, 2022, complete at least 25 percent of the required inspections not completed during 2020 due to COVID-19 restrictions, in addition to the required inspections due in calendar year 2021.

OBJECTIVES COMBINED/ADAPTED:

Strategic Objective 1.1

In the SFY 2021-2025 Strategic Plan, the Objective 1.1 title was:

By July 1, 2024, slow the growth rate of healthcare costs in Idaho by increasing the amount of value-based arrangements (paying providers based on positive health outcomes), from 29 percent to 50 percent.

In this year's SFY 2022-2026 Strategic Plan, Objective 1.1 has been replaced by a new Strategic Objective focusing on improving access to healthcare by increasing the number of National Health Service Corps certified sites, which will improve access to underserved Idahoans and allow them to access services on a sliding fee scale. The department made these changes to Objective 1.1 to focus on healthcare access. Although DHW will continue to annually measure the percent of payments in value-based arrangements, the department cannot control how commercial payers or Medicare reimburse providers and organizations for services or the types of contracts they establish. We do have control for Medicaid per member per month costs, and the department has added task 1.3.3 (track progress towards cost containment for Medicaid) in recognition of the role Medicaid costs play in overall healthcare costs. The focus has been shifted to access and a Strategic Objective that can have a positive impact for Idahoans seeking healthcare services, especially underserved and low income individuals. The new objective is aligned to support Goal 1 to ensure affordable and available healthcare.

SFY 2021-2025 Strategic Objective 1.3/ SFY 2022-2026 Strategic Objective 2.2

The work from the SFY 2021-2025 Strategic Plan's Objective 1.3 has been moved in this year's SFY 2022-2026 Strategic Plan into Objective 2.2.

In the SFY 2021-2025 Strategic Plan, the Objective 1.3 title was: Improve the children's mental health system in Idaho by providing treatment and support to children, youth, and their families, evidenced by an increase in the number of children/youth whose functional impairment has improved upon completion of services from 30 percent to 50 percent, by June 30, 2024.

The department leadership feels that the work in this objective is more clearly aligned to the Goal 2: Protect children, youth, and vulnerable adults, and the new strategic tasks included in this objective are also complementary to each other and in alignment with this goal.

Also, In the SFY 2021-2025 Strategic Plan, the Objective 2.2 title was:

Transform the behavioral healthcare system in Idaho for adults with serious mental illness and addiction by implementing 75 percent of a comprehensive strategic plan by June 30, 2024.

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In this year's SFY 2022-2026 Strategic Plan, the title for Objective 2.2 has been changed to:

Develop and implement a behavioral healthcare system in Idaho that provides the services that people need, when they need them through implementation of the YES implementation plan and the IBHC strategic action plan by July 1, 2024.

The new wording for Objective 2.2 reflects the direction of the developments of the Idaho Behavioral Health Council strategic action plan. The Idaho Behavioral Health Council has prioritized nine of the 32 recommendations, and the department has accepted responsibility for five of the nine prioritized recommendations, as seen in the newly worded 2.2.

Strategic Objective 4.1

In the SFY 2021-2025 Strategic Plan, the Objective 4.1 title was:

Create consistent, respectful experiences for customers throughout their journey by developing and implementing a customer experience strategy that improves the customer's experiences in key moments. The strategy will be measured by the Customer Effort Score and improved by 10 percent by July 1, 2024.

In this year's SFY 2022-2026 Strategic Plan, the focus on Objective 4.1 continues to be on customer service, but will now be through a focus on plain language communication. The work previously included in Objective 4.1, relating to Customer Experience projects (such as improving the Katie Beckett application process), has been moved to Strategic Objective 2.2: Develop and implement a behavioral healthcare system in Idaho that provides the services that people need, when they need them through implementation of the YES implementation plan and the IBHC strategic action plan by July 1, 2024.

In this year's SFY 2022-2026 Strategic Plan, the Strategic Objective 4.1 title is now:

Implement the use of plain language to improve the customer language through simplification of plain language. Commitment to plain language will be measured by a Flesch Reading Ease Score of 60 or above and a Flesch-Kincaid Grade Level Score of 8th grade (or under). Plan should be in place by through Dec. 31, 2021. The Office of Communications will commit to meeting these goals in 75 percent of reviewed and new material between Dec. 1, 2021, and Dec. 1, 2023.