Branch-Hillsdale-St. Joseph Community Health Agency 2027-2032 Strategic Plan

Approved by the Branch-Hillsdale-St. Joseph Community Health Agency Board of Health and its Health Officer

Brent Leininger, Chairperson

Rebecca A. Burns, Health Officer

August 27, 2026

BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY | YOUR LOCAL HEALTH DEPARTMENT

BRANCH-HILLSDALE-ST. JOSEPH
COMMUNITY HEALTH
AGENCY | YOUR LOCAL HEALTH DEPARTMENT

www.bhsj.org

In recent years, the work of public health professionals and public health agencies has been spotlighted. A sometimes-forgotten piece of the healthcare system, public health is being scrutinized and politicized calling for BHSJCHA to shape a well-defined path for the future with this strategic plan. At BHSJCHA our mission of "helping people live healthier" explains the work we do whether that is issuing a permit for a new on-site sewage system, inspecting a restaurant, providing an immunization, screening a child for hearing and vision, or the many other services our staff provide. This dedication to helping residents in the tri-county area live healthier, coupled with our vision of "being the trusted health resource for all people" is not just words on paper for our staff. With everything we do at BHSJCHA we mean what we say, and we strive to do everything with excellence using best practices. We do endeavor to be your trusted health resource.

As we take on the opportunity of providing public health services to all people in our tri-county service area, we value inclusion, innovation, and integrity; statements that define BHSJCHA's commitment to how we do business. We have completed work on the 2026-2029 Community Health Needs Assessment. Based on the CHNA information and data, a new Community Health Improvement Plan will further define the activities that our local public health Agency will engage in over the next four years across the jurisdiction.

The development of this four-year plan was a collaborative effort that included community partners and leaders, BHSJCHA staff and administration, and the BHSJCHA Board of Health. A good plan takes direction from many voices and opinions and I am proud to present this plan which included input from a diverse set of stakeholders. The planning is done; let's get to the work of implementation.

Sincerely,

Rebecca A. Burns, MPH, RS
Health Officer

Branch-Hillsdale-St. Joseph Community Health Agency

Mission: *The mission of the Branch-Hillsdale-St. Joseph Community Health Agency, Your Local Health Department is, helping people live healthier.*

Vision: *The vision of the Branch-Hillsdale-St. Joseph Community Health Agency, Your Local Health Department is, to be the trusted health resource for all people.*

Values:

- **Inclusion:** Ensuring all who seek services and our employees are treated with respect
- **Innovation**: Seeking effective and efficient ways to improve community health
- **Integrity**: Being fair and honest

Strategic Priorities:

- **Employee Development and Investment**
- **Community Engagement**
- **Proactive Planning**

Background

The Branch-Hillsdale-St. Joseph Community Health Agency (BHSJCHA), under the direction of public health officer, Rebecca A. Burns, MPH, RS, determined the need to update the agency's strategic plan which had been in place since 2022. The agency's executive team coordinated the planning process and hired an external consultant to facilitate meetings and draft the updated plan. The agency's front-line staff also participated in the planning process through their participation in the initial strategic planning survey and meetings during the planning process. Community partners, county officials, and board of health members were also survey participants. BHSJCHA internal participants included representation from all levels and all divisions within the department. Evidence of multi-level staff participation is provided in Appendix A.

The Strategic Planning Process

The team held its first planning session on June 10, 2026. During the initial session, the team reviewed the accomplishments and status of the 2022-2026 plan, the pre-planning survey results and participated in the Strengths, Weaknesses, Opportunities and Challenges (SWOC) analysis.

During the first meeting, the team reviewed its mission statement and compared it to the survey responses received. Based on the survey results, the participants believed the mission statement was still relevant, and the team decided to keep the current mission statement. The team also kept

the vision statement that was adopted during the previous planning process. The team then turned its attention to the values. The BHSJCHA has a set of values and again the survey participants deemed them to be accurate with no need to revise them. By the end of the first meeting, the team developed a draft of the Strengths, Weaknesses, Opportunities and Challenges (SWOC) assessment and a proposed set of strategic directions with goals and objectives to be further discussed and refined at the front-line staff meetings. The proposed strategic directions are:

- Employee Investment and Development
- Community Engagement
- Proactive Planning

On June 18, 2026, the front-line staff met in one of two identical (morning and afternoon) sessions. Both groups reviewed the information and draft materials provided and developed at the first meeting. Both sessions generated refinement to the strategic directions as well as the goals and objectives for each. Potential strategies to achieve the objectives and ultimately the goals were generated by the front-line staff. Additional proposed versions of the SWOC analysis were also developed.

The contracted consultant was then tasked with objectives capturing and merging the potential strategies voiced by the staff during the two meetings. These were sent to the health officer for review with her leadership team for further refinement and to determine which will then be incorporated into the draft plan for team member review and comment.

A SurveyMonkey survey was disseminated to staff, and they were asked to rank the strategic directions and the corresponding objectives. The consultant and leadership team used the results to set timelines and deadlines for the objectives and determine which areas to focus on in the first year of the plan. A total of 39 responses were received.

In communications with the health officer, the consultant provided the survey results and draft plan. The leadership team members developed time-framed targets for the objectives and strategies included in the plan and fine-tuned the narrative. The final draft was sent to the department staff on July 21, 2026.

Staff Involvement

The front-line staff of the department were provided with the opportunity to participate in a strategic planning online survey that was conducted prior to the first planning session. Staff were asked to provide feedback on the current trends they see in the community, the internal strengths and weaknesses and external opportunities and challenges. The information gathered was instrumental in the SWOC analysis. (See Table 1)

After the strategic directions and proposed objectives were developed, the staff were once again asked to participate in a second online survey to prioritize the goals and strategies to create the time-framed targets for the objectives. The first staff and community stakeholder survey garnered 36 responses and the second survey which was sent to staff received 39 responses. Both survey instruments and results are available upon request.

Stakeholder Engagement

The final draft document of the strategic plan was shared with the BHSJCHA's Board of Health Program, Policy and Appeals Committee on August 19, 2026, for input and feedback from both the Board and the public. Commissioner Stoll commented that the plan reflects the input of the Board of Health, community organizations, and agency employees. He commended leadership on their work in the development of the plan.

A total of four community partners participated in the strategic planning survey that was used to develop the plan's priorities.

Alignment with BHSJCHA Organizational Plans

Branch-Hillsdale-St. Joseph Community Health Agency Needs Assessment and Improvement Plan

In 2026, the BHSJCHA also engaged in a community health needs assessment (CHNA) for Branch County and health improvement planning process for the district. BHSJCHA will need to determine how to incorporate the CHIP action plan activities into the strategic plan and how the agency and in coordination with partners will work collectively to address them resulting in improving the health status within the three-county district.

It is anticipated that the strategic plan will be updated to include those areas (services, policy development, interventions, etc.) where BHSJCHA will serve in a leadership capacity during the health improvement plan implementation.

Quality Improvement, Workforce Development, and Performance Management Plans

The BHSJCHA has identified and implemented quality improvement (QI) projects throughout the department over the course of the past few years as we continue to develop a culture of quality. The strategic plan will be valuable resource for us to use to identify additional QI projects as we begin implementation of our plan.

Our strategic planning process has identified the need to focus on employee engagement and development. One of the strategic priority areas- Employee Development and Investment- is dedicated to the ongoing implementation of the BHSJCHA Workforce Development Plan.

We recognize we need to sustain our concerted effort to create a comprehensive performance management system within the department. The strategic plan with its measurable objectives and strategies will be a cornerstone for our performance management system as we develop department-wide performance goals. We have invested in the VMSG performance management software and are committed to training staff and utilizing the system to track our performance in both programs and policies.

External Trends and Events that Impact Our Work

As evidenced in the SWOC analysis provided in Table 1, the BHSJ Community Health Agency has multiple factors that potentially impact on our work. Both opportunities and challenges have been identified and are addressed in the strategic plan.

Across Michigan, public health agencies are navigating a rapidly shifting landscape marked by complex social, economic, and technological pressures. Communities continue to struggle with limited housing and transportation options, leaving many residents unable to access essential services, including healthcare, employment, and education. These structural barriers deepen existing inequities and place additional strain on local health departments that are already working at capacity.

At the same time, competition among public health agencies for limited state and federal funding has intensified. As overall funding decreases, agencies must do more with fewer resources, often competing against one another for grants that once reliably supported core programs. This financial pressure makes long-term planning difficult and threatens the sustainability of critical public health services.

Meanwhile, the healthcare landscape itself is evolving. The rise of artificial intelligence (AI) in healthcare presents both opportunities and challenges. While AI has the potential to improve diagnostics, streamline operations, and expand access to care, it also requires new skills, ethical considerations, and infrastructure investments that many rural and under-resourced agencies are not yet equipped to manage.

Behavioral health trends add another layer of complexity. Vaping continues to increase, particularly among youth, creating new prevention and education needs. This surge comes at a time when misinformation about health topics spreads rapidly online, making it harder for public health agencies to communicate evidence-based guidance.

The political environment further complicates these efforts, such as shifting priorities, polarization, and legislative changes influence funding streams, public trust, and the ability to implement community-wide interventions.

Demographic changes also demand attention. Agencies must work to keep up with population shifts, including aging residents, migration patterns, and changing socioeconomic conditions. These shifts affect service demand, workforce needs, and the types of health challenges communities face.

Finally, the recent closure of a local hospital and another hospital that is no longer offering obstetrics and behavioral health units within the jurisdiction is of growing concern. Loss of healthcare services in rural Michigan has created significant gaps in care. Residents must travel farther for emergency services, maternal care, and specialty treatment, increasing the burden on local health departments to fill the void through expanded outreach, partnerships, and community-based programs.

Together, these challenges form a complex environment in which public health agencies must adapt quickly, collaborate strategically, and innovate continuously to protect and promote the health of their communities.

During all the strategic planning sessions, discussions were held related to the current level of distrust in government and in public health. This is a primary reason our strategic plan will focus on community engagement in our continued efforts to restore the public's trust in public health and achieve our agency vision to be the trusted health resource for all people.

	Table 1: Strength, Weaknesses, Opportunities and Challenges Branch-Hillsdale-St. Joseph Community Health Agency	
INTERNAL	**STRENGTHS** • Multi-disciplinary Expertise • Reputation within the community • "Policies stronger than ever" • Reliable leadership team • Knowledgeable, caring staff • Ability to make referrals • Transparency to the public • Longevity • Able to adapt to client needs • Teamwork • Focused on morale • Social media and marketing • Interoffice relationships • Doing much with minimal staff • Community resource • Improved communications • Leadership team looking for program options and funding opportunities • Good work environment	**WEAKNESSES** • Staff shortages • "Pockets" of negative staff • Multiple steps in decision making process • Limited resources to innovate • Policy and procedure changes with limited notice from state/federal agencies • Pay scales • Language barriers • Technology limitations inhibit productivity • Limited funding • Internal communication strategy could be improved • High employee turnover
EXTERNAL	OPPORTUNITIES • Increased community collaborations • Funding opportunities • Housing and transportation opportunities • Staff volunteer opportunities • Community is supportive of agency • Advertising to immigrant populations • Need for shaded bus stop • Outreach opportunities to older population and people with disabilities • Community trust is on the rise • Interactions with school and ISD superintendents • Improved relationships with health care systems and providers	CHALLENGES • Lack of housing and transportation options • Competition among PH agencies in Michigan for funding • Funding decreases • Artificial intelligence (AI) in healthcare • Increases in vaping • Political environment • Keeping up with population shifts • Misinformation on health topics • Closure of local hospital

Strategic Plan Outline

The plan outlined on the following pages is displayed in a table format to improve readability. The tables indicate each Strategic Priority Area highlighted in blue, the Objectives are highlighted in gray, and the strategies highlighted in yellow. Each priority area includes the identified champion(s), and each strategy includes the metric/measure to be used to monitor progress.

Annual action plans will be developed and utilized to stay on track each year of the plan and to be able to analyze the work accomplished each year as well as to identify when adjustments to timelines and activities need to be modified.

Strategic Direction 1: Employee Investment and Development	
Goal: Demonstrate a commitment to continued learning and professional growth	
Champions: Rebecca Burns, Theresa Fisher, Laura Sutter, Joe Frazier, and Heidi Hazel	
Objective 1.1: Update the wage equity plan and present it to the board of health annually starting in 2027 and continuing throughout the plan	
Strategies	Metric/Measure
1.1.1 Continue to share wage equity review annually with all staff and the Board of Health	Wage equity review shared with board of health annually
1.1.2 Educate staff on how the pay scale is developed and maintained	Staff education completed by the established timeline
1.1.3 Investigate the development of health and wellness opportunities	Investigation completed by the established timeline
1.1.4 Investigate an incentive system within programs to win rewards	Investigation completed by the established timeline
Objective 1.2: Develop a resource for staff to access required and/or recommended virtual educational opportunities by June 30, 2027	
Strategies	Metric/Measure
1.2.1 Provide a directory/list of all training courses per position	Directory/list provided to staff by the established timeline
1.2.2 Update the Workforce Development Plan to include annual training courses for each job position	Workforce Development Plan updated by the established timeline
1.2.3 Educate staff on the process to request professional development and educational opportunities	Staff education completed by the established timeline

1.2.4 Create a mechanism for employees to follow up with supervisors after training is complete	Training follow-up mechanism created and implemented by the established timeline
1.2.5 Identify consistent trainers for each position to ensure every new employee in the position, regardless of office location, receives the same information	Trainers identified and system implemented by the established timeline
Objective 1.3: Create or update current job aids for all positions by December 2027	
Strategies	Metric/Measure
1.3.1 Members from each department/section to develop and update job aids annually, aligning them with policies and procedures.	Reviews and updates completed by the established timeline
1.3.2 Ensure all new employees have access to all required agency software applications on first day of orientation with follow-up from both IT and human resources	Review of orientation materials to ensure the information is included
1.3.3 Include visual examples in the job training materials	Creation of visual examples complete by the established timeline
1.3.4 Provide information as to how each position aligns with others in the division/agency	Information provided to staff
Objective 1.4: Work with each staff member to create an employee-centered skill development plan during the annual review process by December 2027	
Strategies	Metric/Measure
1.4.1 Develop a tool for staff to use for a self-assessment related to skill development	Self-assessment tool developed and implemented

1.4.2 Complete self-assessment annually to identify areas of opportunity	Compilation and analysis of self-assessments completed on an annual basis
1.4.3 Review goals that are put on annual reviews for completion	Review of goals completed by established timeline
1.4.4 Support staff in their chosen development plan	Annual review of the staff development progress in chosen development plan

Strategic Direction 2: Community Engagement	
Goal: Promote the role and extend the reach of public health in our communities	
Champions: Aimmee Mullendore, Samantha Keeney, Shelby Young, Kris Dewey, Kyle Moore, Terri Penney, and Nathan Francis	
Objective 2.1: Maintain, enhance, and build authentic relationships with key stakeholders within the communities on an ongoing basis	
Strategies	Metric/Measure
2.1.1 Health Officer, Medical Director, Directors and Supervisors increase the visual presence in the community by attending events, meetings, and scheduling appointments with community partners. (Chambers of Commerce, Hospital board, town councils etc.)	Number of meetings attended and number of partners engaged
2.1.2 Continue developing short videos on social media about what we do or processes on how to do something (well permits, CSHCS applications, etc.)	Number of videos produced
2.1.3 Continue to create and disseminate "What to Expect", Tip Sheets, "How-To" and "Where do I go" videos and fact sheets by department about how to do business with public health. Place on website	Number of tip sheets, videos and fact sheets added to the website annually
2.1.4 Continue participating and hosting partnership meetings within the communities – both in person and virtually	Number of meetings participated in with partners Number of meetings hosted with partners
2.1.5 Continue building relationships with businesses (including their HR departments) to educate about public health services	Number of business contacts annually
2.1.6 Increase the distribution of agency promotional brochures in all languages to locations such as housing complexes, laundry facilities,	Number and locations of agency brochure distribution

domestic violence shelters, international food stores, libraries, and locations where cultural groups gather for resources	
2.1.7 Continue building relationships with hospitals, health care providers, and clinics	Number of collaborative projects with hospitals, health care providers, and clinics
Objective 2.2: Build relationships with four non-traditional partners by December 2027	
Strategies	Metric/Measure
2.2.1 Continue to seek relationships with, and be present in places, where we can connect to people of various cultures, religions, and ethnicities	Number of new connections made with people of various cultures, religions, and ethnicities annually
2.2.2 Investigate partnerships with transit authorities for outreach opportunities	Number of partnerships created annually
2.2.3 Offer in-service learning opportunities to community partners to increase awareness of mission and services	Number of in-service opportunities annually
Objective 2.3: Develop four stories annually to help the community connect with public health beginning in 2027 and ongoing	
Strategies	Metric/Measure
2.3.1 Collect client testimonials and place them on websites and social media and include a link to the associated program	Number of client testimonials collected and placed on website on an annual basis
2.3.2 Highlight a program with a team member(s) each month with a story of what they do at the agency	Number of programs highlighted annually

2.3.3 Investigate alternative methods of seeking client/customer feedback continuously	Number of alternative methods tried to seek client/customer feedback on an annual basis
Objective 2.4: Nominate individuals and/or groups for annual public health awards annually beginning in 2027	
Strategies	Metric/Measure
2.4.1 Seek nominations from staff for individuals and groups to be submitted to available award programs	Number of nominations sought and submitted annually
2.4.2 Create an online portal for staff to submit nominees to Health Education and Promotion	Portal created by the established timeline

Strategic Direction3: Proactive Planning	
Goal: Implement policies that mitigate risk, promote innovation and support organizational success	
Champions: Rebecca Burns, Theresa Fisher, Laura Sutter, Joe Frazier, and Heidi Hazel	
Objective 3.1: Develop a succession plan for supervisors, directors, and health officer by December 2027	
Strategies	Metric/Measure
3.1.1 Develop paths to leadership development for staff	Paths developed by the established timeline
3.1.2 Develop a mechanism for staff to apply, or to be nominated, for additional leadership development opportunities	Mechanism established and implemented by the established timeline
Objective 3.2: Develop and complete cross training for department staff beginning in 2027 and complete by June 2028	
Strategies	Metric/Measure
3.2.1 Create a directory of staff with their area(s) of expertise when assistance is necessary	Directory created by the established timeline
3.2.2 Standardize program training check lists to provide consistent job performance across the jurisdiction	Program training check lists developed by the established timeline
3.2.3 Develop a procedural manual or reference guide for agency positions	Procedural manual/reference guides completed for agency positions by the established timeline
Objective 3.3: Ensure all staff retain, understand, and utilize developed policies and procedures by December 2028	
Strategies	Metric/Measure

3.3.1 Create a checklist for Supervisors to ensure new staff understand and utilize agency policies and procedures	Checklist created by the established timeline Annual analysis of staff understanding and utilization of agency policies and procedures
3.3.2 Continue the creation of policy quizzes and develop a schedule to be utilized agency-wide	Number of policy quizzes created, and staff success/scores analyzed Schedule developed and implemented
3.3.3 Educate staff on where to find all agency policies and procedures	Staff education completed on an annual basis
3.3.4 Create a "Fun Fact Friday" posting for the BHSJ Insider	Number of "Fun Fact Friday" postings created on an annual basis
Objective 3.4: Mitigate the agency's risk related to cybersecurity on an ongoing basis	
Strategies	Metric/Measure
3.4.1 Provide a cybersecurity and IT risk educational opportunity with an external speaker (MMRMA) for all staff	MMRMA educational opportunity provided by the established timeline
3.4.2 Investigate opportunities to provide cybersecurity webinars to all staff quarterly	Number of webinars identified and provided to staff on quarterly basis
3.4.3 IT to provide important updates to staff related to cybersecurity at the monthly All Staff meeting	Number of IT updates provided to staff on an annual basis
3.4.4 Monthly tests by IT staff to identify cybersecurity weaknesses and improve staff member's ability to identify "phishing"	Number of monthly tests provided annually
3.4.5 Implement multifactor authentication where possible	Implementation of multifactor authentication by the established timeline

Appendix A

Strategic Planning Meeting Participants

June 10, 2026, Leadership Team Meeting

Rebecca A. Burns, MPH, RS – Health Officer

Kris Dewey, BSHA, CPH - Health Education & Promotion Supervisor

Theresa Fisher, BS - Administrative Services Director

Joe Frazier, REHS - Environmental Health Director

Heidi Hazel, BSN, RN - Personal Health and Disease Prevention Director

Samantha Keeney, BSN, RN - Coldwater Clinic Supervisor, Immunization Program Manager

Kyle Moore, REHS - Environmental Health Supervisor

Terri Penney, RN - Hearing/Vision & Children's Special Health Care Supervisor

Laura Sutter, BS - Area Agency on Aging Region IIIC Director

Shelby Young, BSN, RN - Hillsdale Clinic Supervisor, WIC Program Manager

June 18, 2026, Front Line Staff Meeting -AM session (Sign-In Sheet available upon request)

Abby Fader- EH Administrative Assistant

Adam Willis – Sanitarian

Alan Elliott – IT Manager

Alecia Campbell – PH Nurse

Amber Alexander- PH Nurse

Amey Little- Breastfeeding Peer

Annalisa Rice – Sanitarian

April Nordahl – Breastfeeding Peer

Bonnie Angus – Biller

Brianna Ellsworth- Clinic Tech

Candy Cox – Clinic Administrative Assistant

Diana Rogers – Administrative Assistant

Isabella Gutierrez – Health Educator

Kaity Gross – PH Nurse

Lina Perafan – Clinic Tech

Mackenzie Horsfall – Sanitarian

Mary Susland – Clinic Tech

Nate Francis – Emergency Preparedness Coordinator

Nina Smth -AAA Outreach

Olivia Jacobs -Sanitarian

Savanna York – Breastfeed Peer

Stephanie Hightree- CSHCS Rep

Tenia Dossett – Clinic Tech

Toni Laughlin – AAA Victim Specialist

Vera Sierminski- Clinic Tech

Connie Elliot - EH Administrative Assistant

June 18, 2026, Front Line Staff Meeting -PM session (Sign-In Sheet available upon request)

Abby Littlefield – PH Nurse

Alivia Karamatic – Sanitarian

Amanda Brooks – CSHCS Nurse

Angie Cole- Clinic Tech

Barb Keith- Sanitarian

Daniela Carmona – Clinic Tech

Emily Motes – Sanitarian

Jen Hull – Accountant

Jolene Sheffer- Clinic Administrative Assistant

Julia Brosnan – Sanitarian

Justin Hicks - IT Manager

Kaleigh Bonner - Sanitarian

Kayse O'Donnell - HR Assistant

Kim Boyter -Clinic Tech

Lisa Palmer – PH Nurse

Lisa Redmond – Community Health Worker

Lori Hibbs – Clinic Tech

Melissa Gilbert – Clinic Tech

Nichole Simon – AAA Administrative Assistant

Nicole Ewers – CSHCS Rep

Tina Scheidiller – PH Nurse

Wendy Nowicke – AAA VOCA