

STRATEGIC PLAN

2024 - 2027

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LETTER FROM THE COMMISSIONER



Dear Reader,

I am pleased to introduce and begin our collective work to advance the goals set forth in the Boston Public Health Commission's 2024-2027 Strategic Plan. I appreciate the collaborative effort of our staff, Mayor Michelle Wu, and the Board of Health in setting a strategic direction for the Commission that will capitalize on our strengths and enable us to build a healthier and more equitable Boston.

This document charts a course for a new chapter in public health for our City. Our world has recently faced one of the most significant public health threats ever known. The COVID-19 pandemic amplified the need for more robust public health infrastructure, including a highly skilled public health workforce, better data and surveillance methodologies, and well-resourced emergency preparedness strategies. During the height of the pandemic, our dedicated and committed staff members rose to meet enormous challenges. In doing so, we embodied our mission to work in partnership with communities to protect and promote the health and well-being of all Boston residents, especially those impacted by racism and systemic inequities. As we continue to meet today's challenges and prepare for the future, it is imperative that we promote staff well-being, increase morale and ensure a pipeline for future public health leadership. Our staff are our most important asset as we strive to build a healthier Boston.

These last few years have also amplified the dire need to address racism and to dismantle systems of oppression. Among local public health departments, the Boston Public Health Commission has long been a forerunner in efforts to advance health equity. We believe that these ideologies are much more than buzzwords; they are central tenets for our work. As such, using this Strategic Plan as a guide, we will operationalize anti-racism and advance equity in all programs and policies both within our institution and through our external programming. Continued efforts to build meaningful partnerships with community members is essential to achieving these goals. Our progress will be measured and evaluated to ensure accountability to the communities that we serve.

I am excited about working with you to implement this Strategic Plan. I look forward to reimagining what public health can be in our City. I hope that we can build upon lessons learned, adapt to changes in the world around us, and advance our mission, vision, and core values together.

Thank you,

Bisola Ojikutu

Bisola Ojikutu MD MPH FIDSA
Executive Director, Boston Public Health Commission
Commissioner of Public Health, City of Boston

I. INTRODUCTION

PURPOSE

The Boston Public Health Commission 2024-2027 Strategic Plan is the foundation for Commission-wide efforts to work in partnership with communities to protect and promote the health and well-being of all Boston residents, especially those impacted by racism and systemic inequities.

The Strategic Plan, developed through a comprehensive planning process with engagement from BPHC staff, leadership, and stakeholders, identifies critical objectives to support organizational growth and strategies that will serve as a roadmap aligning efforts across the Commission for the next four years. This Plan will serve as guidance for ongoing planning, performance management, and quality improvement efforts at all levels of the organization. The Strategic Plan is also informed by BPHC's current infrastructure and planned infrastructure improvements, as well as the overall resources that will be required to ensure efficiency and effectiveness as a high-performing health department.

The Strategic Plan aligns with existing BPHC and community-informed plans and initiatives, including:

- BPHC Core Values (Spring 2023)
- BPHC Anti-Racism Policy (2021)
- BPHC Performance Management & Quality Improvement Plan (Dec 2022)
- Workplace Improvement Initiative, WIIN (2022)
- BPHC Workforce Development Plan (December 2022)
- Health of Boston Reports (2023)
- PHAB 2016 Reaccreditation Guidance
- 2022 Community Health Needs Assessment (CHNA)
- 2022 Community Health Improvement Plan (CHIP)
- BPHC Strategic Plan (2019-2023)

In addition, the planning process and resulting plan address emerging trends. From conversations with peer health departments and others in the field, and national studies of challenges facing the public health workforce, we know that many of the needs we see are not unique to Boston, and the strategies set forth in this plan are rooted in an understanding of how to meet them in our organizational and community context.

Throughout the process of engaging internal stakeholders, many of the key themes reinforced issues that leadership, partners, and funders have identified as needs, particularly in the areas of workforce development, infrastructure, data, community engagement, and redoubling our work to operationalize our commitment to racial equity and anti-racism.

As BPHC continues to build upon its role as a member of the City of Boston’s Mayoral Cabinet and document the health and health equity needs of our population, the strategies laid out in this plan will better empower BPHC to serve as a chief health strategist, organizing cross-sector partnerships to organize and advance collaborations to address the social determinants of health and drivers of inequitable health outcomes.

This Strategic Plan is grounded in an awareness of the need to continue to respond to challenges in the public health workforce and potential for shifts in resources, as well as increased focus and opportunities for funding public health following the COVID-19 pandemic. As a result, this Strategic Plan is focused on building public health infrastructure across BPHC.

While this document does not create specific targets for population health outcomes, the goals, objectives, and strategies set out in this plan will better empower BPHC to more effectively provide critical public health services and support progress towards eliminating the persistent racial and ethnic health inequities in longevity and other outcomes that have been documented in BPHC’s Health of Boston report series and elsewhere.

In evaluating and prioritizing the strategies in this plan, BPHC has taken into consideration financial feasibility of goals, objectives, and strategies while keeping ambitious ideas on the table. As the Strategic Plan is implemented and progress toward its goals is tracked, BPHC leadership will continue to identify emerging trends and changing circumstances. These considerations will be included as the Plan is reviewed each year and updates to the Plan are evaluated for inclusion.

II. BACKGROUND

ABOUT THE BOSTON PUBLIC HEALTH COMMISSION

The Boston Public Health Commission is the country's oldest health department. Its roots trace back to 1799, when Paul Revere was appointed Boston's first health officer. The initial reason for forming the board of health was to prevent a potential cholera outbreak. Health officials posted signs on lampposts, held meetings, and led an early-day public information campaign to reduce preventable cholera deaths.

More than two hundred years later, the Boston Public Health Commission continues the tradition of taking a neighborhood-level illness prevention and health prevention approach to public health, offering a wide range of health services to Boston residents, with a focus on improving health within communities that have been made most vulnerable by racism and other systemic inequities. BPHC prides itself on providing innovative services for our residents.

The Commission has a vigorous commitment to the health of Boston and envisions a thriving Boston where all residents live healthy, fulfilling lives free of racism, poverty, violence, and other systems of oppression, and where all residents have equitable opportunities and resources, leading to optimal health and well-being.

The Boston Public Health Commission is governed by a seven-member board of health, appointed by the Mayor of Boston.

MISSION

In 2023, the BPHC Executive Office and Office of Racial Equity and Community engagement (ORECE) led an all-staff engagement process to explore the possibility of revising our mission statement to better reflect our commitment as a health department to work with community to advance health equity and promote racial justice. This process included over 275 staff, our external Racial Health Equity Advisory Committee (RHEAC), our internal Anti-Racism Advisory Committee (ARAC), and our Board of Health. Our revised statement is:

The mission of the Boston Public Health Commission is to work in partnership with communities to protect and promote the health and well-being of all Boston residents, particularly those impacted by racism and systemic inequity.



We achieve our mission by providing and supporting:

- accessible high-quality community-based health and social services
- community engagement and advocacy
- development of health promoting policies and regulations
- disease and injury prevention
- emergency services
- health promotion
- and health education services

VISION

The Boston Public Health Commission envisions a thriving Boston where all residents live healthy, fulfilling lives free of racism, poverty, violence, and other systems of oppression. All residents will have equitable opportunities and resources, leading to optimal health and well-being.

CORE VALUES

EQUITY	COLLABORATION	ANTI-RACISM	PEOPLE-CENTERED	TRANSPARENCY
Equitable redistribution of resources	Authentic and inclusive partnerships	Commit to anti-racism as an action	Invest in our employees	Transparent communication practices
Challenge multiple forms of oppression	Engage multiple partners, practice teamwork, and value everyone	Value and support Black, Indigenous, and People of Color	Build a culture of belonging	Use best available data to inform decision-making

The BPHC Core Values represent the central beliefs and principles of the organization. In 2022, in support of the Workplace Improvement Initiative, the Office of Racial Equity & Community Engagement (ORECE) led an engagement process with all staff and external stakeholders, including the Racial Health Equity Advisory Committee. ORECE analyzed the feedback and identified the top five values: Equity, Collaboration, Anti-Racism, People-Centered, and Transparency. BPHC’s Core Values are what we stand for and communicate through behaviors and actions. In action, core values drive our day-to-day work, interactions, and advancement of the BPHC Mission and Vision. Specifically, our core values help create BPHC’s culture and guide decisions including strategic planning, community investments, and partnerships.

ACCREDITATION



In November 2017, BPHC achieved national accreditation through the Public Health Accreditation Board (PHAB). Public health accreditation helps to ensure that the BPHC continuously improves quality, accountability, and performance to meet community needs. The national accreditation program, supported by the CDC and the Robert Wood Johnson Foundation, sets standards for program and service improvements for governmental public health departments. This document will support BPHC’s ongoing efforts to ensure accountability and performance.

DEVELOPING THIS STRATEGIC PLAN

BPHC leadership undertook a thorough and comprehensive planning process (See Figure 1 below) between March and December 2023 to identify the Commission’s strategic priorities, goals, and strategies. This process included input from key stakeholders, engagement with staff across the organization, as well as integration and alignment with existing plans and policies.



- All-Staff Town Hall
- Consider work in progress from previous strategic plan, other strategic priorities, including Boston CHNA and CHIP, PMQI Plan, Workforce Development Plan
- New ideas to address current and anticipated challenges
- Alignment with mission and core values
- Meeting requirements and mandates
- Strategic value and necessity
- Feasibility
- Review and refine
- Validate with working groups
- Finalize

1. The Planning Process - Overview of the process BPHC used to develop the 2024-27 Strategic Plan

PLANNING PHASE I: IDEATE

As BPHC set out to create this Plan, we evaluated work still in progress from the 2019-2023 Strategic Plan, identified foundational elements of other plans and policies, and assessed current and anticipated Commission challenges. Key activities included:

- Assessing the progress made on goals and strategies in the previous strategic plan
- Interviewing leadership and stakeholders including the Commissioner, a member of the BPHC governing board, and key staff members

- Conducting a workshop with BPHC senior leadership to review the planning process, discuss and review the status of the previous plan, and identify Commission goals and priorities
- Conducting a town hall and survey open to all BPHC staff to solicit input on priorities, challenges, and potential goals, objectives, and strategies. Facilitated breakout discussions at the all-staff town hall attended by 240 staff were organized around key four themes aligning with BPHC Core Values and existing plans and policies: workforce, anti-racism and equity, data and innovation, and community partnerships. A fifth open discussion group was included to create space to gather additional priorities, however the themes identified through analysis of the results from the town hall and subsequent SLT planning retreat workshop affirmed the focus on these four general priority areas.



2. Town Hall Responses – Word cloud of responses from breakout groups during the All-Staff Town Hall in May 2023. Groups were asked what they expected to be the biggest challenges and most important priorities for BPHC in the next four years.

PLANNING PHASE II: PRIORITIZE

BPHC reviewed priorities and strategies that were identified in the previous phase to evaluate alignment with its core values, strategic goals, and other priorities. Strategies were assessed and prioritized based on their potential impact and feasibility. Key activities included:

- Conducting a second workshop with BPHC senior leadership to review, evaluate, and identify additional objectives and strategies
- Conducting focus groups and working sessions with key stakeholders in each priority area to further refine and prioritize objectives and strategies

PLANNING PHASE III: FINALIZE

BPHC refined objectives and strategies, organized plan elements based on the implementation timeline, and validated the plan with key staff.

- Validating the plan with key stakeholders for each priority area and BHPC leadership.
- Refining measures for each strategy.
- Assigning an implementation schedule for each objective and strategy.
- Finalizing the plan with review and feedback by strategic priority teams.

III. 2024-27 STRATEGIC PLAN

The objectives for each key strategic priority area are as follows:

1: Workforce and Infrastructure

- Objective 1.1: By December 31, 2027, increase employee recruitment with a focus on diversity, equity, inclusion, and belonging
- Objective 1.2: By December 31, 2027, develop employee skills and competencies
- Objective 1.3: By December 31, 2027, enhance workforce and Human Resources infrastructure

2: Equity and Anti-Racism

- Objective 2.1: By December 31, 2027, fully implement, revise, and measure equity and accountability in all policies, planning, services, and communications
- Objective 2.2: By December 31, 2027, improve equity in internal and external services we provide
- Objective 2.3: By December 31, 2027, invest in communities of color by increasing diversity of contractors and contracted partner agencies
- Objective 2.4: By December 31, 2027, advance health equity and contribute to narrowing long-standing racial gaps in life expectancy and healthy longevity among community residents

3: Data and Innovation

- Objective 3.1: By December 31, 2027, improve data collection, integration, sharing, analysis and collaboration
- Objective 3.2: By December 31, 2027, enhance enterprise systems to improve BPHC work and programs
- Objective 3.3: By December 31, 2026, foster innovation to address health equity and emerging public health challenges

4. Community Engagement and Partnerships

- Objective 4.1: By December 31, 2027, create infrastructure and guidance to support, expand, and enhance community partnerships
- Objective 4.2: By December 31, 2025, foster cross-sector partnerships and mobilize coordinated resources to improve health and health equity
- Objective 4.3: By December 31, 2027, develop and implement new and innovative approaches to engage with the public and build trust

It is important to note that while we have identified "Equity and Anti-Racism" as its own strategic priority, anti-racism activities and outcomes are integrated throughout each of the other three priority areas, including specific strategies, measures, and timeframes.



**WORKFORCE &
INFRASTRUCTURE**

1. WORKFORCE AND INFRASTRUCTURE

↔ CORE VALUE CONNECTION: PEOPLE-CENTERED

BPHC recognizes that a strong public health workforce provides the foundation for a healthy city. Workforce development has been, and continues to be, a major focus of BPHC leadership. The Commission is committed to strengthening, appreciating, diversifying, and retaining our workforce. This work focuses on diversity, equity, inclusion, and belonging. This includes ensuring a culture of anti-racism and belonging that allows all staff to grow and thrive.

The objectives and strategies in this plan are designed to uphold BPHC's core value of being People-Centered and reflect the findings and activities of the BPHC Workforce Development Plan and the BPHC Workplace Improvement Initiative (WIIN). The objectives and strategies also align with and are reinforced by the CDC Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems Grant, through which BPHC is strengthening BPHC's workforce through hiring, training, retention and building foundational capacities including systems, processes and policies.

Key: Alignment with Existing Plans

- ❖ Workforce Development Plan
- Workplace Improvement Initiative (WIIN)
- * Anti-Racism Policy
- ✦ CHNA/CHIP
- ← PMQI

Objective 1.1: By December 31, 2027, increase employee recruitment and retention with a focus on diversity, equity, inclusion, and belonging

- Strategy 1.1.1: By June 30, 2025, engage a team of staff to focus on **workforce improvement planning** to assess future workforce needs, determine gaps, and barriers to equitable employee retention and develop strategies to address them including succession planning, stay interviews, exit interviews, and plan for the future of work ❖○

Lead: Human Resources

- Strategy 1.1.2: By December 31, 2026, enhance, resource, and increase **employee engagement, inclusion, and belonging**; develop strategies to promote positive work-life balance and boost morale including staff engagement surveys, appreciation events, and regular opportunities to build community ❖○

Lead: Consortium for Professional Development, Wellness at Work, Human Resources

- Strategy 1.1.3: By December 31, 2027, improve four **benefits** and encourage and support staff in using them ○

Lead: Benefits, Human Resources

- Strategy 1.1.4: By December 31, 2026, invest in **employee wellness**; enhance and increase participation in "Wellness at Work" program ○

Lead: Human Resources, Wellness at Work

- Strategy 1.1.5: By December 31, 2025, assess **compensation and pay equity** within BPHC; develop strategies to close gaps ○

Lead: Human Resources

- Strategy 1.1.6: By March 31, 2025, **enhance equitable recruitment, branding, communications strategies, and implementation of a hiring guide** to ensure a workforce that reflects the community we serve, making BPHC a top place to work ○

Lead: Chief People Officer, Communications

Objective 1.2 By December 31, 2027, develop employee skills and competencies

- Strategy 1.2.1: By December 31, 2027, conduct employee training needs assessment and develop or identify targeted **trainings to address skills and knowledge gaps** reaching 95% of staff ❖○

Lead: Consortium for Professional Development and Human Resources

- Strategy 1.2.2: By December 2024, assess baseline anti-racism knowledge and implement revised **anti-racism training** for all staff *○

Lead: Consortium for Professional Development with Office of Racial Equity and Community Engagement

- Strategy 1.2.3: By December 31, 2027, develop **leadership skills** through universal supervisor training ensuring 90% completion and continue management and leadership skill trainings developed with external partners ❖○

Lead: Consortium for Professional Development and Human Resources

- Strategy 1.2.4: By December 31, 2027, increase access, support, and investment in **employee education serving 95% of employees and licensures serving all covered employees** ○

Lead: Bureaus, Programs, and Offices, with Consortium for Professional Development

- Strategy 1.2.5: By December 31, 2026, establish and document at least two **professional development goals** for each employee annually that include program needs, or support department goals ❖🟡

Lead: Human Resources

- Strategy 1.2.6: By December 31, 2027, develop a **structured career pathways program** to build out career ladders for all positions through support from supervisors, educational credits, and alignment of job descriptions with BPHC foundational statements, core values, and Public Health Workforce Core Competencies. ❖🟡

Lead: Human Resources, Labor Relations, Consortium for Professional Development

Objective 1.3: By December 31, 2027, enhance workforce and Human Resources infrastructure

- Strategy 1.3.1: By December 2024, implement a new **Learning Management System (LMS)** and develop processes and policies to link staff to training ❖🟡

Lead: Consortium for Professional Development, Information Technology Services

- Strategy 1.3.2: By September 31, 2024, **support consistent, equitable, and successful onboarding** of new hires and new roles through new management onboarding guide. 🟡

Lead: Consortium for Professional Development, Human Resources

- Strategy 1.3.3: By January 31, 2024, hire a Chief People Officer, and by January 2025 conduct an **organizational assessment for Human Resources** and related workforce functions (including professional development, recruitment, wellness, etc.) to assure alignment with BPHC goals 🟡

Lead: Executive Office, Chief People Officer

- Strategy 1.3.4: By December 31, 2026, implement improved **employee evaluation process** and implement individual employee performance evaluation system to support employee growth with 100% of employees completing evaluations including personal goals by June 30, 2027 🟡

Lead: Human Resources, Information Technology Services

A stylized shield-shaped logo with a light blue border. Inside the shield is a light beige background. Overlaid on this is a white cross with rounded ends. The cross has a white rectangular shape in the center, which resembles an open book. The text "EQUITY & ANTI-RACISM" is centered over the book shape.

**EQUITY &
ANTI-RACISM**

2. EQUITY AND ANTI-RACISM

↔ CORE VALUE CONNECTIONS: EQUITY, → ANTI-RACISM

BPHC is committed to advancing equity and racial justice both internally and externally.

BPHC sets an expectation that all staff and leadership commit, individually and as part of the BPHC team, to hold ourselves accountable for establishing a culture of antiracism and advance racial equity and justice through each of our bureaus, programs, and offices.

The objectives and strategies in this plan reflect the commitments and actions outlined in the BPHC Anti-Racism Policy Statement and Action Plan and align with our core values of Equity and Anti-Racism.

Objective 2.1: By December 31, 2027, fully implement, revise and measure equity and accountability in all policies, planning, services, and communications

- Strategy 2.1.1: By December 2024, assess baseline anti-racism knowledge and implement **anti-racism training for supervisors** including a focus on implicit bias, micro and macroaggressions, and equitable conflict resolution *○

Lead: Consortium for Professional Development with Office of Racial Equity and Community Engagement

- Strategy 2.1.2: By December 31, 2025, establish four processes or mechanisms to periodically review and ensure that **racial equity and justice commitments** are reflected in all policies, budget proposals, job descriptions, grants, RFPs, and contracts, and that commitments are considered and documented in decision-making processes *

Lead: Office of Racial Equity and Community Engagement, Executive Office

- Strategy 2.1.3: By December 31, 2026, establish two trauma-informed processes that ensure staff and client **concerns and their sources are identified and conflict resolution tools are used** to result in equitable outcomes *○

Lead: Human Resources; Labor Relations; General Counsel's Office, Office of Racial Equity and Community Engagement

Key: Alignment with Existing Plans

- ❖ Workforce Development Plan
- Workplace Improvement Initiative (WIIN)
- *Anti-Racism Policy
- ✂ CHNA/CHIP

Objective 2.2: By December 31, 2027, improve equity in internal and external services we provide

- Strategy 2.2.1: By December 31, 2024, and each year thereafter, five additional programs or offices will receive **support in applying the BPHC Equitable Community Engagement Policy and Principles** to ensure that the lived experiences and voices of Black, Indigenous and other People of Color inform policy, program, budget, and community-based investment decisions *

Lead: Office of Racial Equity and Community Engagement, Programs and Offices

- Strategy 2.2.2: By December 31, 2024 **review, revise, and implement Language Access Plan**, including Culturally and Linguistically Appropriate Services (CLAS) standards

Lead: Communications Office

- Strategy 2.2.3: By December 2025, 10 bureaus, offices, and programs will report **on anti-racism and equity measures** in BPHC's Performance Management System, and **use an equity lens to conduct regular anti-racism and equity assessments** for each department and program and identify areas for quality improvement projects *

Lead: Office of Performance Improvement, Office of Racial Equity and Community Engagement; Programs and Offices

Objective 2.3: By December 31, 2027, invest in communities of color by increasing diversity of contractors and contracted partner agencies

- Strategy 2.3.1: By December 31, 2025, implement two **new approaches to further engage Certified Underrepresented Business Enterprises (CUBEs)** as those entities are defined by BPHC's Equitable Procurement Policy and measure performance at the bureaus and office level *

Lead: Administration and Finance

Objective 2.4: By December 31, 2027, advance health equity and contribute to narrowing long-standing gaps in life expectancy and healthy longevity among community residents

- Strategy 2.4.1: By December 31, 2024, develop and begin implementation of a citywide **healthy longevity roadmap** that outlines strategies to address key drivers of premature mortality and racial gaps in life expectancy

Lead: Executive Office, All Bureaus

- Strategy 2.4.2: By December 31, 2027, determine and publish preliminary **outcomes of the citywide healthy longevity roadmap**

Lead: Executive Office, Center for Public Health Science, Technology and Innovation



**DATA &
INNOVATION**

3. DATA AND INNOVATION

↔ CORE VALUE CONNECTION: TRANSPARENCY

BPHC is committed to being an innovative leader in public health, continuously improving our resources and approaches to our work. To achieve this, the organization continues to build and refine an infrastructure and culture that supports data-driven programs and decision-making. We also seek to build and promote expertise in the ever-changing field of public health, developing and testing innovative approaches to understand and address the City's most pressing public health needs.

The objectives and strategies in this plan align with the BPHC Performance Management and Quality Improvement (PMQI) Plan and our core value of Transparency.

Key: Alignment with Existing Plans

- ❖ Workforce Development Plan
- Workplace Improvement Initiative (WIIN)
- * Anti-Racism Policy
- ✦ CHNA/CHIP

Objective 3.1: By December 31, 2027, improve data collection, integration, sharing, analysis and collaboration

- Strategy 3.1.1: By December 31, 2025 fully implement a comprehensive **Performance Management and Quality Improvement system (PMQI)** to promote a culture of quality through management and continuous quality improvement ←

Lead: Office of Performance Improvement

- Strategy 3.1.2: By December 31, 2025 implement community data standards to standardize the structure, content, collection and use of public health data **to enable efficient analyses that can produce reliable evidence** to identify inequities and inform equitable policy, program, project, budget and community benefit decisions and quality improvement efforts i.e., standardized data disaggregation by race/ethnicity, income, preferred language, gender, sexual orientation, neighborhood and other socio-demographics

Lead: Center for Public Health Science, Technology and Innovation

- Strategy 3.1.3: By December 31, 2024, build collaborations and infrastructure with **external program providers and systems** to better understand population health and health inequities through improved access to large national, state, and local data sets

Lead: Center for Public Health Science, Technology and Innovation

- Strategy 3.1.4: By December 31, 2027, build staff's **data management and analytical skills** across all levels; provide tools including trainings to upskill staff to use data and tools for decision making for a minimum of one training per year for each staff member ◉

Lead: Center for Public Health Science, Technology and Innovation, Consortium for Professional Development

- Strategy 3.1.5: By December 31, 2027, **fully implement the CDC's Data Modernization Initiative** to get better, faster, actionable insights for decision-making at all levels of public health

Lead: Center for Public Health Science, Technology and Innovation

- Strategy 3.1.6: By December 31, 2025, improve **data availability, accessibility, and dissemination** to the community, academic collaborators, city, and other partners including by building, integrating, and improving five public health dashboards

Lead: Center for Public Health Science, Technology and Innovation

Objective 3.2: By December 31, 2027, enhance enterprise systems to improve BPHC work and programs

- Strategy 3.2.1: By December 31, 2027, identify and implement seven **information technology infrastructure and systems** to improve flexibility, increase efficiency, and build capacity across the organization; leverage emerging technologies to improve processes

Lead: Information Technology Services

- Strategy 3.2.2: By December 2027, identify and implement four **systems improvements** to bolster the security, efficiency and effectiveness of enterprise-wide functions including data, administrative, finance, and human resources applications

Lead: Center for Public Health Science, Technology and Innovation, Administration and Finance, Human Resources

Objective 3.3: By December 31, 2026, foster innovation to address health equity and emerging public health challenges

- Strategy 3.3.1: By December 31, 2025, create five groups, programs, or mechanisms to encourage and foster **cross-program and external collaboration** to incubate interdisciplinary public health innovation

Lead: Center for Public Health Science, Technology and Innovation

- Strategy 3.3.2: By December 31, 2027, create two initiatives to ensure BPHC work advances **evidence-based and innovative practices especially in the development of new programs or initiatives**

Lead: Center for Public Health Science, Technology and Innovation



**COMMUNITY
ENGAGEMENT &
PARTNERSHIPS**

4. COMMUNITY ENGAGEMENT AND PARTNERSHIPS

↔ CORE VALUE CONNECTION: COLLABORATION

Public health is not a unilateral effort. As a leader and coordinator of the City’s public health strategies, BPHC is committed to creating, enhancing, and sustaining formal and informal partnerships with the community we serve and other organizations. This includes building infrastructure and tools that support these partnerships and foster collaboration.

The objectives and strategies in this plan align with the 2022 Community Health Improvement Plan and the BPHC Equitable Community Engagement Plan (2020-23). They are designed to uphold our core value of Collaboration.

Key: Alignment with Existing Plans

- ❖ Workforce Development Plan
- Workplace Improvement Initiative (WIIN)
- *Anti-Racism Policy
- ✂ CHNA/CHIP
- ← PMQI

Objective 4.1: By December 31, 2027 create infrastructure and guidance to support, expand, and enhance community partnerships

- Strategy 4.1.1: By December 31, 2025, create new initiatives to **increase resources, systems, and capacity** dedicated to building and maintaining partnerships and engaging community

Lead: Executive Office, with Bureaus Offices, and Programs

- Strategy 4.1.2: By December 31, 2024, and each year thereafter, provide at least 12 instances of **data and public health expertise with an equity lens** to inform advocacy for policy, systems, and environmental change, with a focus on collaboration

Lead: Intergovernmental Relations; Center for Public Health Science, Technology and Innovation

Objective 4.2: By December 31, 2025, foster cross-sector partnerships and mobilize coordinated resources to improve health and health equity

- Strategy 4.2.1: By December 31, 2024, develop an equitable internal procedure related to **appointments of BPHC staff to external advisory bodies** where staff are representing BPHC, including coordination of advocacy, recruitment, selection, tracking, and information sharing, to support BPHC’s mission, goals, and core values

Lead: Executive Office

- Strategy 4.2.2: By December 2024, implement a system for monitoring progress on Community Health Improvement Plan implementation and each year, leverage role as central coordinating entity for **Boston Community Health Collaborative** to increase community awareness, engagement, and implementation of strategies, including policy, and systems changes as well as direct institutional investments with a focus on housing, financial stability, access to services, and behavioral health ✕

Lead: Executive Office, CHNA-CHIP Central Coordinating Staff, in partnership with the Boston Community Health Collaborative

- Strategy 4.2.3: By December 31, 2025, engage healthcare and other sectors in new or enhanced partnerships to advance public health strategies, funding, and innovation, ensuring that **activities and investments are focused on community health needs and health equity goals** ✕

Lead: Executive Office

- Strategy 4.2.4: By December 31, 2025, develop and implement three initiatives to provide **capacity building and technical assistance for community-based organizations** to facilitate partnering with BPHC and expanding impact, which may include online training courses regarding BPHC’s contract process, the invoicing process, as well as budget development

Lead: Executive Office, Administration and Finance

Objective 4.3: By December 31, 2027, develop and implement new and innovative approaches to engage with the public and build trust

- Strategy 4.3.1: By December 31, 2024 and each year thereafter, increase **direct community engagement**, such as through meetings to interact with the public, gather ideas from a wider audience, and foster and support partnerships, reporting back using the “we asked, you said, we heard, and this is what changed” framework

Lead: Executive Office, with Bureaus, Programs and Offices

- Strategy 4.3.2: By December 2025, develop and implement four new innovative and inclusive communications and branding strategies **raise public awareness about BPHC programs and priorities and build trust in public health**

Lead: Communications

- Strategy 4.3.3: By December 31, 2025, enhance community involvement in decision making by strengthening or creating three **advisory bodies and increasing engagement** between groups and BPHC

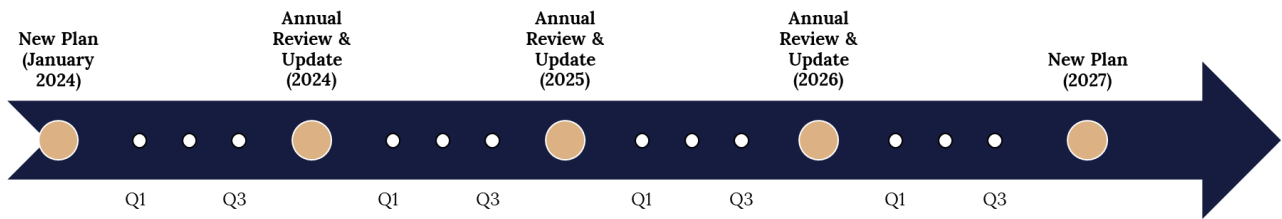
Lead: Executive Office, with Bureaus, Programs and Offices

IV. IMPLEMENTATION AND MONITORING

Strategic planning is not a one-time activity, but rather a continuous process. The BPHC Strategic Plan is a “living document” that will be monitored, reported on, and updated throughout its four-year lifecycle. Key features of plan implementation will include:

- **Staff Engagement:** BPHC’s Executive Leadership, in collaboration with the Communications office, will undertake efforts to ensure that staff at all levels of the organization are continuously made aware of the plan and priorities it sets for the organization, and build a sense of shared responsibility to implement and inform any future revisions to the plan. Throughout the plan period, budget requests, and individual employee workplans and performance evaluations will call on staff and managers to evaluate connections between program and individual goals and the strategic plan. Progress and successes achieved toward plan priorities, objectives and strategies will be highlighted in all-staff newsletters, staff meetings, and other forums to build awareness and recognize engagement.
- **Oversight:** The Executive Office will oversee the implementation and tracking of the strategic plan in collaboration with relevant offices and standing organizational bodies including the Senior Leadership Team. This will include quarterly reports on the strategic plan’s implementation status at Senior Leadership Team meetings.
- **Ownership:** Each strategy is assigned an owner who is responsible for tracking and reporting on progress.
- **Measurement:** Progress for each strategy is measured and reported quarterly, through BPHC’s Performance Management System. These quarterly check-ins provide an opportunity to celebrate progress and identify tasks and strategies that may need troubleshooting or support. Progress will be shared transparently with all staff.
- **Adjustment:** At least annually, the full strategic plan will be reviewed for both progress and relevance. If approved by leadership, strategies may be changed to adapt to changing external and internal needs of public health or as strategies are achieved or adjusted. Where changing or emerging trends identified through staff engagement or leadership affect strategies, revisions to the plan will be made by executive leadership in consultation with the Senior Leadership and other stakeholders, including staff. The Senior Leadership Team will review the plan annually for the purpose of reviewing and recommending updates to the plan.

IMPLEMENTATION CYCLE



Implementation Cycle - The BPHC Strategic Plan will be implemented over the next four years, with quarterly progress checks and annual reviews and updates to help ensure the plan remains relevant and incorporated into everyday work.