



Montgomery County Strategic Plan 2009-2014

“Open For Business”



Table of Contents

Executive Summary	2
Mission and Values	3
The Organization of this Document	4
The Montgomery County Strategic Plan	5-10
Goals, Objectives and Strategies for Departments that Support the Strategic Plan	11-15
Appendixes	16-31

Executive Summary

The purpose of this Montgomery County Strategic Plan is to provide strategic direction, accountability and focus for the Board of County Commissioners, County Manager and County Departments for the next five years. The plan also will serve as a communication tool between the citizens of Montgomery County and their government. The plan can be edited as needed and should be reviewed completely annually.

The Montgomery County Board of Commissioners met on January 13 and 14, 2009 with support from the County Manager and the County Clerk to create a mission statement, goals and objectives that would provide leadership for Montgomery County government during 2009-2010 and for the next five years. The Aycock Group was engaged to facilitate the strategic planning process. The County Manager, county staff and other experts provided data for the retreat.

The central theme of the Board's planning is planning for the long term instead of finding ways to create "*quick fixes*". There are many goals and objectives that require long term analyses, studies and plans covering many different subjects with the aim of finding cost savings and increased benefits. *The Board's goals and objectives focus on the following priorities:*

- Ensuring financial and management accountability
- Addressing long term water and sewer needs
- Creating a facilities plan including increasing energy efficiency
- Encouraging broad participation in economic development efforts
- Incorporating state of the art technology/computer systems throughout the county
- Developing a comprehensive public safety plan
- Collaborating on education issues
- Addressing land use planning
- Developing a long term recreation plan

The Montgomery County Department Heads, with support from the County Manager, met on February 3, 2009, completed the mission statement, and developed strategies that addressed how the Board's goals and objectives could be met. After the retreat, the County Manager and The Aycock Group also met with all Department Heads to add measures and to clarify strategies for the Board's goals. Supporting goals, objectives, and strategies were added for departments who are essential for the implementation of the strategic plan and the Board's vision, but not listed specifically in the Board's objectives.

The Board of County Commissioners believe that Montgomery County Government should have an attitude of being "*open for business*". This is an attitude that is shared by the County Manager county staff, and other professionals who serve the community. There is also a belief that through unity and cooperation of citizens, Montgomery County can be a place of "*A Golden Opportunity*."

Mission Statement

Montgomery County Government enhances the well being of all citizens and promotes unity and cooperation by creating a healthy environment for people to live, learn, work and play

Values

Montgomery County will be “Open for business” and be compassionate to all citizens and visitors.

Montgomery County will be fiscally responsible.

The Organization of This Document

Section I

Section I is the Montgomery County Strategic Plan. The Strategic Plan consists of Goals and Objectives that the Board of County Commissioners established with the support of the county manager and strategies that departments developed in order to meet the objectives. Goals are defined in this plan as the long term impact desired. Objectives are more measurable impacts needed to accomplish the goal. Strategies answer the question how? How will the objectives and thus the goals be accomplished?

Section II

Section II consists of goals, objectives and strategies for departments that support The Strategic Plan. These goals, objectives and strategies were created with support from the county manager and are critical and essential to supporting the strategic plan and to the functions of the county.

Section III

Section III consists of the appendixes. The Health Department and Department of Social Services appendix are extracts from existing documents. The Cooperative Extension appendix consists of information that was extracted and condensed.

Section I: Montgomery County Strategic Plan

- Goal 1: The County Manager and The Finance Director will have a plan completed by June 30, 2009 to increase the fund balance to minimum requirement set by the Local Government Commission as well as how to maintain the fund balance at a level of at least 13%.
- Goal 2: Develop financial strategies for funding debt capacity and the school system.
- Goal 3: The Finance Director will ensure financial accountability.
- Objective 3A: The Finance Director will present clear monthly reports to The Board of County Commissioners.
 - Objective 3B: The Finance Director will present quarterly financial reports to the Board of Commissioners including the below information.
 - Strategy 3(B) (1): The Finance Director will provide an update on progress towards performance measurements and objectives of departments.
 - Strategy 3(B) (2) The Finance Director will provide current and projected economic trends.
 - Objective 3C: The Finance Director will complete a multi-year evaluation of the core services including a study of demand and cost benefit analysis.
 - Objective 3D: The Finance Director will develop financial policies for board approval and financial procedures for staff and agencies to follow.
- Goal 4: Provide adequate public utilities to support existing and projected residential and industrial/commercial growth.
- Objective 4A: The Public Works Director will complete a survey covering the long term water and sewer needs of the county by April 1, 2010. The County Manager will provide a recommended plan that addresses the long term water and sewer needs of the County by May 1, 2010 through the direct guidance of the Public Works Director and other experts.
 - Strategy 4A (1) The Public Utilities Director will hire an engineering firm by April 10, 2009 to locate grants that meet criteria.
 - Objective 4B: The Public Utilities Director will explore possible grants and apply as appropriate.

Objective 4C The Public Utilities Director will prepare a Capital Improvement Plan and present it to the County Manager that prioritizes the needs of the County based on severity of need, capabilities and availability of funds and a plan on how to address these needs within 6 months of approval of funding by the Board of County Commissioners.

Strategy 4C(1) Survey water system across the county.

Strategy 4C (2) Survey for a sewer infrastructure on River Road which includes costs and possible funding sources.

Objective 4D: The County Manager will develop a needs list for projects that fall under the Federal Stimulus Plan 2009. (Completed)

Goal 5: Achieve broader participation in the economic development effort.

Objective 5A: The Board of Commissioners will develop closer coordination with EDC (Economic Development Corporation)

Strategy 5A(1) The EDC will develop monthly written reports to be sent to the Board and quarterly written reports that will be presented to The Board of County Commissioners.

Objective 5B: The Board of Commissioners will work on real issues with town mayors including exploring the idea of combining functions and services. (Such as purchasing, grants and information technology).

Strategy 5B(1) The EDC will sponsor a meeting between the County and the towns.

Objective 5C: The Board of Commissioners will provide leadership to help create a shared vision and empower citizens to be involved in the economic development effort.

Strategy 5C(1) The EDC will empower citizens through its existing business program.

Objective 5D: Promote access to high speed internet for county citizens and businesses. (EDC and County)

Goal 6: Improve existing facilities and assess need for new facilities.

Objective 6A: The Maintenance Director will explore idea of colocating county facilities and present this information to the Board of County Manager by May 30, 2009.

Objective 6B: The Maintenance Director will present options to the county manager as part of the development of the facilities master plan that includes immediate, short term and permanent solutions with benefits and costs by April 30, 2010. The County Manager will present The Facilities Master Plan to the Board of County Commissioners by May 30, 2010.

Objective 6C: Promote environmental friendly and energy efficiency in current facilities and in new construction (LEED).

Strategy 6C(1) The Maintenance Director will conduct a cost benefit analysis of energy efficiency across county government with the assistance of Progress Energy and/or similar organization the county deems appropriate by September 1, 2009.

Strategy 6C (2) The Maintenance Director will ensure that timers on lights are operational and that overall lighting system is effective (ongoing).

Strategy 6C (3) The Administrative Assistant to the County Manager will research and develop a recycling policy to direct county departments. It will be presented to the county manager by April 15, 2009 so that budget can reflect new policy as needed.

Strategy 6C (4) The Administrative Assistant to the County Manager will explore “paperless” office options and present a report to the county manager by September 1, 2009.

Strategy 6C (5) The Maintenance Director will address heating/cooling issues to ensure best use of resources (ongoing).

Goal 7: To incorporate state of the art technology throughout county government and promote accessible internet access to county citizens and businesses.

Objective 7A: The County Manager will design a comprehensive plan by April 1, 2010 to incorporate state of the art technology with assistance from the IT director throughout county government

Strategy 7A (1) The IT (Information Technology) Director will be responsible for prioritizing IT training and ensuring that department heads are trained on essential IT

topics. The IT director will also be responsible for monitoring the IT system and linking employees to appropriate training.
(ongoing)

Strategy 7A(2) The IT Director will research the costs of IT and best practices in the field of IT and will design a Comprehensive IT system for the county. The IT Director will use data from Montgomery County, benchmarking of other governments, and the resources of the School of Government at UNC-Chapel Hill as well as other sources to assist in assessing the needs of the County. The IT director will present various options and levels of solutions to the Manager with appropriate costs.

Strategy 7A (3) The IT Director will conduct a cost benefit analysis of the need for more staff in the IT Department and will prepare a report for The County Manager that describes the staff that are needed, the function they would meet and the qualifications they would have to possess. The IT department will develop a short term 1 year staffing plan that is due to the County Manager by April 10, 2009 and a long term 3 year staffing plan that is due October 12, 2009.

Strategy 7A (4) Montgomery County will focus on improving its current IT technology from 2009 through 2012. The County will explore providing purchasing and GIS services to towns during this same time period. During 2013 and 2014, the IT Director and The County Manager will meet with town IT staff and Town Managers to determine possible coordination and possible County IT services that can be offered to local municipalities.

Goal 8: Provide state of the art public safety system.

Objective 8A: Emergency Services Director will provide the County Manager with a Comprehensive Public Safety Plan by June 2009. The County Manager will provide the Board of Commissioners with a comprehensive public safety plan by July 2009 that addresses all relevant issues including the following:

- Communications Plan

The Director of Emergency Services will be responsible for implementing a two way communication system that will cover the entire county by May 2009.

The Director of Emergency Service will develop reverse 911 ability by October 2009.

The Director of Emergency Services will develop a plan by May 2009 and present it to the manager on how to change the frequency from wide to narrow by 2013.

- Fire Protection Funding
The Director of Emergency Services will conduct a study on how fire department funding could be increased and will present this study to the County Manager by January 2010. *(Evaluate Fire Tax Districts and improve coverage areas).*
- Law Enforcement Plan
Evaluate Staffing needs by March 2010.
- Emergency Medical Services
Determine feasibility of outsourcing by October 2011.
- Rescue Squad
Determine priorities and present document to County Manager by January 2011.
- Emergency Operations
The Director of Emergency Services will create a document that covers what role additional staff would play in the County by June 2009.

Objective 8B: Emergency Management Director will develop and present Emergency Response plan by June 2009. County Manager will present emergency response plan by July 2009.

Goal 9: Improve Educational System.

Objective 9A: The Board of Commissioners will work closely with The School Board to create priorities including improving academic performance and infrastructure.

Strategy 9A(1) A meeting will be scheduled between the County Commissioners and the School Board by July 1, 2009.

Goal 10: Correct errors in zoning ordinance and map as well as discuss the development of land use options.

Objective 10A: The County Manager will propose draft land use plan for consideration by Board of Commissioners by July 2010.

Strategy 10A(1) The Planning Director with assistance from The County Manager will meet with the Board of County Commissioners to determine the scope of the project by May 2009.

Strategy 10A(2) The Planning Director will assess the needs and involve all stakeholders and set up a steering committee starting in July 2009.

Strategy 10A(3) The Planning Director will meet with interest groups, gather citizen input and analyze data. (Ongoing)

Strategy 10A(4) The Planning Director will develop a land use plan draft and present it to the County Manager by May 2010. The County Manager will present the land use plan to the Board of County Commissioners by July 30, 2010.

Objective 10B: The Planning Director will present a modified zoning map to the County Manager by June 2009. The County Manager will propose a modified zoning map to the Board of Commissioners by July 2009.

Goal 11: Provide high quality recreation opportunities in the county.

Objective 11A: The Recreation Director will create a Master Plan on recreation needs and opportunities and present it to the County Manager by December 15, 2009 and to the Board of County Commissioners by January 19, 2010.

Strategy 11A (1) Complete a survey and gather community input to gather information and identify gaps. (ongoing)

Strategy 11A (2) Complete needs assessment on recreation for the County. (ongoing)

Strategy 11A (3) The Recreation Director will research the feasibility of creating a County Park by December 1, 2009.

Section II: Goals, Objectives and Strategies for Departments That Support the Strategic Plan

Goal 1: The Montgomery County Health Department will obtain North Carolina Local Health Department accreditation in 2010 and then work to maintain consistent accreditation status.

To view more detailed Goals for the Health Department see *Appendix A: Montgomery Health Department Goals*

Goal 2: The Department of Social Services and The County Manager's Office will collaborate in finding possible locations for a new Social Services Building.

Objective 2A: The Director of Social Services in collaboration with the County Manager will provide the Board of County Commissioners with the Site Selection Document in April 2009.

Objective 2B: The Site Selection Committee will be established by the third week in April, 2009.

Objective 2C: The Site Selection Committee will recommend possible sites by June 1, 2009.

To view more detailed information about the Department of Social Services
See *Appendix C Montgomery County Social Services Specific Data*

Goal 3: Increase efficiency and effectiveness of the Tax Department by improving staff expertise and training and the quality of equipment and infrastructure.

Objective 3A: The tax administrator will evaluate the current software and present recommendations to the county manager on improvements needed by November 24, 2012.

Objective 3B: The tax administrator will complete an analysis covering outsourcing or providing in house revaluation by November 24, 2009.

Objective 3C: The tax administrator will present to the county manager the benefits of adding the position of paralegal to the tax department staff by November 2010.

Goal 4: The Register of Deeds will ensure that records are accurate and up to date and to ensure that indexes are accurate.

Objective 4A: The Register of Deeds office will place recorded copies of old deed books on an in-house system. A Website Vendor has been engaged and

the project will be completed on a time frame based on available funding.

Objective 4B: The Register of Deeds office will create indexes to organize and reference the information in Objective 4A.

Strategy 4B (1) Discuss fees with vendors.

Objective 4C: The Register of Deeds office will propose a plan to replace all computers, based on a determined time frame, so computers will not become outdated.

Strategy 4C(1) Collaborate with County Information Technology Department to analyze pricing of equipment.

Goal 5: The Director of Inspections will improve the inspection process for the County.

Objective 5A: Evaluate software and present options to county manager in coordination with the Information Technology Director by June 1, 2009.

Objective 5B: If funded, set up a system and train Montgomery County staff on how to operate system by October 1, 2009.

Goal 6: The Board of Elections will work for fair and efficient elections.

Objective 6A: By August 18, 2009, The Board of Elections will appoint 14 precinct Chief Judges and 28 precinct judges to serve 2 year terms.

Objective 6B: The Board of Elections will conduct municipal elections for the town of Biscoe, Candor, Mt. Gilead, Star and Troy.

Goal 7: Cooperative Extension will work in collaboration with other stakeholders for the benefit of the citizens of Montgomery County

For Details on Cooperative Extension see:

Appendix B: Cooperative Extension extract from 2009 Montgomery County Plan of Work

Goal 8: The Veterans Service Office will assist widows and dependents in obtaining benefits which they are entitled to under federal, state and local laws.

Objective 8A: The Veteran Services Officer, according to available funding, will receive the training and certification necessary to continue to provide the highest quality of assistance to our veterans with minimal operating expense.

Objective 8B: The Veteran Services Officer will ensure that three are accessible bathroom that meet the United States Department of Justice requirements.

Objective 8C: The Veteran Services Officer will prepare a report on current and future staffing needs.

Goal 9: The Montgomery County Public Library Director will work to improve the library services for the community.

Objective 9A: The Library Director will monitor the efforts to expand and renovate the Troy Library.

Objective 9B: The Library Director will increase public awareness of public library services available to the community.

Strategy 9B (1) Establish working relationship with both local newspapers

Strategy 9B (2) Offer quality adult programs

Strategy 9B (3) Continue to visit elementary schools and offer quality children's programs including summer reading programs in partnership with Montgomery County, towns, local businesses and organizations.

Goal 10: The Soil & Water District Director will work to ensure the highest standards.

Objective 10A: The Soil & Water District Director will write contracts encumbering all funds allocated to Montgomery County Soil & Water Conservation District for the North Carolina Agriculture Cost Share Program and Community Conservation Assistance Program by May 30, 2009.

Objective 10B: The Soil & Water District Director will work with 10 confined animal feeding operations to write or revise their comprehensive nutrient management plans by April 1, 2010.

Objective 10C: The Soil & Water District Director will attend trainings according to budget constraints and state requirements to follow current policy changes and ensure that the program is administered properly.

Goal 11: Animal Control Supervisor will ensure high standards of animal control.

Objective 11A: The Animal Control Supervisor will review charges for housing animals and adoption fees and prepare a report analyzing these issues by June 2009.

Objective 11B: The Animal Control Supervisor will monitor efforts to evaluate need for a new facility and any future construction.

Objective 11C: The Animal Control Supervisor will ensure a good transition from the use of a gas chamber to needle Euthanasia.

Strategy 11C (1) A Contract will be established with a Veterinarian by May 2009.

Strategy 11C (2) Train all staff once a contract is obtained by October 2009.

Strategy 11C(3) Coordinate efforts to transition to needle euthanasia with site design according to site design time frames.

Goal 12: The Senior Customer Services Representative with the County Water System will study the feasibility of new approaches to banking for the county.

Objective 12A: The Senior Customer Services Representative will study the feasibility of online banking for the county and present a report to the Utilities Director by September 1, 2009.

Goal 13: The Human Resources Director will enhance and improve current services in a way that will increase benefits to the employees and use resources in the most responsible method in order to improve retention and productivity of county employees by developing closer contact and informational seminars.

Objective 13A: Create an assistant HR position and have it reviewed by the Manager and the Board of Commissioners by June 30, 2009.

Objective 13B: Create an assistant Personnel Tech position and have it reviewed by the manager and Board of Commissioners by July 31, 2010. The feasibility of purchasing a scanner for HR Department and a larger printer for HR shall be ready for review by July 31, 2010

Goal 14: The Housekeeping Supervisor will maintain the cleanliness of County buildings.

Objective 14A: The Housekeeping Supervisor will present an explanation for why a Housekeeping Supervisor's office would benefit the County to the County Manager by June 30, 2009.

Objective 14B: By January 1, 2010, The Housekeeping Supervisor will present a five year equipment rotation schedule to the County Manager.

Goal 15: The Sheriff's office and The County Manager's office will partner when feasible for the service of the citizens.

Objective 15A: The County Manager and The Sheriff will continue to evaluate the Jail and Health Department collaboration.

Objective 15B: The County Manager and The Sheriff will partner as feasible to address immigration issues.

Objective 15C: Salaries of law enforcement personnel will be evaluated as needed.

Section III. Appendixes

Appendix A: Montgomery Health Department Goals

Adult Health/Primary Care

Primary Care/Adult Health program focuses on complete care. It provides comprehensive medical care for clients of all ages. The program includes health promotion, disease prevention, health maintenance, counseling, patient education, diagnosis and treatment of acute and chronic illnesses. Services include assessment, physical examinations, and immunizations. On site testing includes lab work, blood sugar testing, pregnancy testing, pap smears and referral for diagnostic testing.

Goals: Overall wellness for our patients.

Objectives:

1. Promote access to preventive health services.
2. To provide clients with relevant information regarding health and nutrition.
3. Monitor and advocate for immunizations for all age clients.
4. Display article in paper promoting preventive/controlling acute/chronic illnesses before February 2010.
5. Use effective modes of communication with clients in order to provide quality health care.

Environmental Health Division Goals and Objectives

Goal: To protect public health and the health of the natural environment

Objectives: Food, Lodging, and Institutions - To protect the public from exposure to pathogens in food service, lodging, and institutional establishments through proper regulatory procedures and protocols.

Child Day Cares: To protect children from exposure to pathogens in child day care establishments through proper regulatory procedures and protocols.

Child Lead Poisoning Prevention: To protect children from exposure to lead in the environment through proper regulatory procedures and protocols.

Tattoo Establishments: To protect the public from exposure to pathogens in tattoo establishments through proper regulatory procedures and protocols.

Swimming Pools: To protect the public from exposure to pathogens in public swimming pools through proper regulatory procedures and protocols.

On-Site Water Protection/Wastewater: To protect the public from exposure to pathogens in wastewater and to protect the groundwater through proper regulatory procedures and protocols.

Private Drinking Water Wells: To protect the public from exposure to pathogens and contaminants in private drinking water wells and to protect the groundwater through proper regulatory procedures and protocols.

Family Planning

Purpose of Program:

To enhance the socio, economic and medical status of families by the provision of Family Planning services to women who desire contraception to avoid, plan or space future pregnancy. Target population is low income women in need of family planning intervention with priority assigned to teens and women with history of medical risks related to pregnancy and/or poor pregnancy outcome and women followed for prenatal care.

Program Description:

The Montgomery County Health Department's Family Planning Program provides annual physical exams including Pap smear and breast exam for women of childbearing age, prevention of pregnancies, laboratory services, and referrals for abnormal findings. Education and counseling about chosen birth control method and detection and treatment for specific problems or infections

Goals:

- Reduction of unintended pregnancies in Montgomery County
- Increase client participation in Family Planning
- Improve compliance of clients in correct use of birth control
- Increase clients obtaining Family Planning Waiver

Objectives:

- Educate clients on health issues to better improve their health and the health of any future pregnancies.
- Send reminder appointment letters 1 week before appointment, also call clients 1-2 days before appointment.
- Educate and demonstrate use of birth control method of patient's choice
- Continue to increase Family Planning numbers by advertising our program in the community and in other departments (DSS, WIC and MH).
- Increase flexibility in scheduling clients, reschedule any missed appointments.
- Assist with transportation for clients as need.
- Assure the Family Planning client is seen in a reasonable amount of time.
- Refer any eligible clients to apply at Department of Social Services for Family Planning Medicaid Waiver.

The Montgomery County Health Department's Communicable Disease program

Program Description:

The Montgomery County Health Department's Communicable Disease program focuses on the prevention of sexually transmitted infections, HIV, vaccine preventable diseases and Tuberculosis infections through education. The Communicable disease program provides information, testing,

treatment and /or referral for diseases that can be spread through food, water and from person to person. The Communicable Disease program offers free and confidential screening, testing, and treatment for sexually transmitted infections. Services provided by the Communicable Disease program promote, assure and protect the health of the people in Montgomery County by eliminating and /or reducing communicable diseases. Infectious disease is a constant threat to all people, regardless of age, sex, lifestyle, ethnic background or social status. Communicable disease can cause illness, suffering, or even death, placing a huge burden on society. Although modern advances have controlled some infectious diseases, new diseases continue to emerge. Continuous monitoring for communicable disease is done by passive surveillance. State and Federal guidelines are used by the Montgomery County Health Department in the reporting and the treatment of communicable diseases.

Goal and objectives of the program

The goal of the Communicable disease program is to prevent and control the spread of communicable diseases.

Objective: Reduce the incidence of sexually transmitted infections, including HIV in Montgomery County. By December 31, 2009 would like to see a 5% to 10% decrease in the number of clients treated for sexually transmitted infections.

Strategies:

- Surveillance
- Prevention
- Education
- Screening
- Treatment
- Contact notification
- Appropriate medical and social referrals

Objective: Follow up with individuals diagnosed with a communicable disease to provide information, education, and referral. Communicable disease reports received which require completion of the part B communicable disease report will have a 100% follow up rate.

Strategies:

- Contact local healthcare providers and obtain pertinent information for follow up
- Review communicable disease reports to make certain appropriate lab work and treatment has been completed
- Contact individuals to complete communicable disease report, and make certain they are improving

Objective: Prevention of vaccine preventable diseases through immunization. Ninety percent of STD charts will be assessed for immunization status

Strategies:

- Immunization against vaccine preventable diseases to be offered to all clients presenting to the STD clinic at the Montgomery County Health department.

Objectives: Surveillance - early identification of cases in an effort to prevent further spread of a communicable disease. The North Carolina Electronic Disease Surveillance System lab workflow will be checked daily for positive lab work. Physicians will be reminded bi-annually of the importance of reporting communicable diseases within the timeframe specified for reportable diseases.

Strategies:

- Begin active surveillance once a communicable disease case has been identified
- Maintain good working relationships with the school system, daycares, hospitals and healthcare providers in the county
- Continue to share information with all healthcare partners
- Provide consultation and education related to communicable diseases to clients, health care providers, and the public
- Submit articles to local newspapers on causes and preventive measures for suspected disease
- Keep all channels of communication open

Health Education/Health Promotion

2009/2010

Health Education

Goal: To increase awareness of the health services available from the Montgomery County Health Department, to provide appropriate health education materials and resources to the community and to provide community health data in order to determine the county's health problems and needed interventions.

Objectives: Present programs to community, public/private agencies, faith based organizations on services available at the Health Department and educate and inform Montgomery County citizens about health problems, concerns and provide necessary information to help improve their overall health.

- 1) Provide a monthly health related article to the local newspapers. This may include general health awareness messages or alerts about specific health problems or concerns.
- 2) Participate in three or more health fairs or community events to promote Health Dept. services and wellness initiatives.
- 3) Prepare the State of the County Health Report to be submitted to the State on December 7, 2009, to follow up on health priorities identified in the 2008 Community Health Assessment.
- 4) Provide one-on-one education to all new Maternity and Family Planning patients that come to the MCHD for these clinic services.

Health Promotion

Goal : To promote good cardiovascular health through policy and environmental changes that promote and support physical activity, healthy food choices, and tobacco prevention and control in local community.

Objectives: Develop Action Plans that support the promotion and prevention of cardiovascular disease through policy and environmental interventions in the areas of physical activity, nutrition and tobacco use in the community; whether in churches, schools, worksites or other venues.

- 1) Collaborate with the Sparrow Project (a regional faith based cardiovascular health intervention) to promote the development of a wellness program with a second African American church in Montgomery County. This program will work towards walking initiatives and healthy food policies for church meetings.
- 2) Partner with Partnership for Children on the NAPSACC program which will promote physical activity and nutritional policy changes in at least two daycare centers.

Continue to participate and lead County Wellness Committee in the promotion and development of a Walking Challenge and/or healthy meeting policy (foods served) for county employees.

Maternity Care Coordination Program

The Maternity Care Coordination program provides formal case management services to eligible women during their pregnancy and postpartum.

Goals/Objectives for Maternity Care Coordination Program

The goal of the Maternity Care Coordination program is to promote healthy pregnancy and positive birth outcomes.

Objectives of the program are to demonstrate an increase in healthy birth outcomes as evidenced by statistics from HSIS reports and yearly state statistics and increase the number of clients served by the program by continuing outreach through WIC, clinic, pregnancy fairs and other community events

Montgomery County Health Department Maternal Health Program

Program Description:

The Maternity Program provides comprehensive prenatal care to the residents of Montgomery County who are unable to seek care elsewhere, primarily due to low income status, travel restrictions and language barrier.

Services include:

- Physical exams and laboratory services
- Nutritional counseling
- Access to care for high risk pregnancies
- Prenatal Education classes

- Patients may choose to deliver at either Moore Regional Hospital or Stanly Regional Medical Center

Goal:

The Maternal Health Program will provide prenatal care to residents of Montgomery County, targeting clients that are unable to receive care elsewhere.

Objectives:

- Enroll 10 new clients a month within the next 12 months.
- Provide a whole day a week maternity clinic.
- Screen all clients requesting appointments to determine if immediate appointment is needed.
- Will work-in appointments on other clinic days if necessary.
- Offer Maternity Care Coordination Services.
- Make arrangements for transportation assistance.
- Assist with Medicaid referral.

Call all new clients and remind of their appointment

- Will work-in appointments on other clinic days if necessary.
- Offer Maternity Care Coordination Services.
- Make arrangements for transportation assistance.
- Assist with Medicaid referral.
- Call all new clients and remind of their appointment.

Public Health Preparedness Program

Program Description:

The Public Health Preparedness Program develops the public health disease surveillance infrastructure to ensure Montgomery County Health Department (MCHD) is prepared to prevent, mitigate, and/or respond to disease outbreaks and biological threats to our community. Continuous training is necessary to sustain the effectiveness of the public health workforce to respond to emerging public health threats and to demonstrate competency in a wide range of public health specialty areas. MCHD must continue to build and test their capacities to plan, mitigate, and respond to public health emergencies that may affect their populations, including their infrastructures and resources.

Goals and objectives

1. MCHD is prepared to respond competently to man-made and natural events (disasters and disease outbreaks).
 - a. MCHD staff and/ or Epidemiology Team (Epi) will participate in at least 1 preparedness exercise annually.

- b. 96% of MCHD staff will complete required preparedness training when offered
- c. MCHD staff will be NIMS compliant by completing ICS 100, 200, 700 & 800.
- d. MCHD staff will have access to workforce development opportunities beyond the required preparedness training.

Measurement Tool: Certificates of ICS course completion on file for 100% of MCHD staff. Workforce Development logs with a 95% completion rate.

2. MCHD will increase the community's awareness of their role and MCHD's role in disaster preparedness and response.
 - a. Create and distribute public messages to the community (presentations, web pages, news outlets, print, etc).
 - b. Public will participate in flu clinic/mass dispensing exercises.
 - c. Create a common message Public Service Announcement (PSA) in cooperation with Local Health Information Team.
 - d. Explore the development of local, interactive, web-based surveillance and information system.

Measurement Tool: Documentation of messages, system, and community participation.

Teen Outreach Program (TOP)

Program Description:

The Teen Outreach Program (TOP) is a classroom-based program designed for small group discussion and activities that are of special interest to young people. A health educator meets with students during the Teen Living classes one time per week, per classroom, at both area High Schools.

Goal

Fewer teen pregnancies, promotion of health and wellness, and decreased risky behavior will directly result in prevention of health risk, disease, and illness.

Objectives

1. By the end of the semester, 95% of participants will be able to describe risky behavior in teens and identify the potential negative outcomes of these behaviors.
2. By the end of the semester, 95% of participants will document at least one behavioral change he/she has made, or plans to make, in regards to improved decision making and healthy living.
3. By the end of the semester, 95% of participants will document or verbalize at least 3 ways to decrease the risks of teen pregnancy and STDs (one of these ways being abstinence).

4. By the end of the semester, 95% of participants will document or verbalize an increased knowledge and insight of the positive benefits of a healthy lifestyle and a goal-oriented future and identify at least one short term and one long term goal for themselves.
5. By the end of the semester, 90% of participants will demonstrate improved community awareness and care giving skills by participating in a community service project.
6. By the end of the year, and yearly thereafter, 75% of participants will document or verbalize improved healthy lifestyle changes, decreased risk taking behaviors, improved goal setting, and successful academic achievement.

Child Health Program

The child health program assures provision of preventive health care services for children in order to: reduce mortality and morbidity among children and youth resulting from communicable disease, injuries (intentional and unintentional), and other preventable conditions; promote health behaviors; and support optimal physical, social and emotional health of children and youth. Children of all ages, birth to 21 years of age, are eligible for the child health program. In this program patients receive well child exams, including vision and hearing screens, height and weight checks, developmental screenings, a complete physical exam, lab work, and education based on age. If any abnormalities are found during the exam, a plan of care is developed and appropriate referrals are made.

Goals/objectives for child health program:

1. Continue to increase our child health numbers, especially non-Medicaid patients, by continuing to advertise program in community and in other departments, i.e. WIC, DSS. Also, maintain our flexibility as we schedule patients, giving appointment dates and times that are requested by the parents, rescheduling any missed appointments, and arrange transportation for clients in need. We will evaluate our patient numbers by looking at HSIS/HIS data, which shows us how many patients we have seen in the child health clinic.
2. Assure the child health visit is as pleasant as possible for patient and parents. Child health clinic staff will ensure that clients' are seen within a reasonable amount of time, and doesn't have to wait a long period of time for services. We will be able to evaluate time spent in office by looking at in and out times on each patient's TIC sheet. Also, parents will be able to complete a client satisfaction survey, which is performed twice a year to evaluate services provided by the health department.
3. Increase the percentage of children 5 to 11 years of age who receive services from the health department who had a body mass index below the 85th percentile but at or above the 5th percentile for age and gender. The most current rate for Montgomery county is 47 percent. This rate will be increased by: providing children and parents with nutritional information, reevaluating BMI's at subsequent visits, and referring patients to WIC for nutritional counseling. We will evaluate the improvement by looking at next years percentage rates

WIC Program Goals and Objective

Program Description:

The Woman, Infant and Children program is to provide healthy foods to pregnant and postpartum woman, infant and children under 5. In addition WIC educates its participants on a healthy diet, healthy behavior and importance of exercise. WIC also educates pregnant and postpartum woman on importance of breastfeeding and provides postpartum breastfeeding woman with support.

Goal # 1

To increase the number of breastfeeding woman on WIC.

Objectives:

1. July 2009 visit with Healthcare providers in the county who see newborn infants.
2. August 2009 begin weekly telephone follow-up with moms postpartum who are breastfeeding.
3. October 2010 provide an in-service to Healthcare providers in the county on breastfeeding.
4. Increase the number of woman still breastfeeding at 6 weeks postpartum from 33% to 38%.

Appendix B: Cooperative Extension extracted and condensed from 2009 Montgomery County Plan of Work

Cooperative Extension Long Range Plan Objectives

Approved: February 12, 2009

- Youth and adults will develop and strengthen critical life skills.
- North Carolina's plant, animal and food systems will become more profitable and sustainable.
- Youth and adult program participants will make healthy food choices, achieve the recommended amount of physical activity and reduce risk factors for chronic diseases.
- Parents and caregivers will effectively use recommended parenting, self care practices and community resources.
- Consumers and communities will enhance the value of plants, animals, and landscapes while conserving valuable natural resources and protecting the environment.

III. Relationship to County Government Goals, Objectives and Strategies

- County Commissioners have listed a number of goals to work toward in 2009 with which Cooperative Extension can make a meaningful contribution. .
- Extension can help families and individuals find additional ways to conserve water while meeting their own needs as county government works to meet the needs of the county population .
- The county 4-H program can work closely with the Recreation Director to provide educational recreation opportunities for all ages.
- Involving young people in Youth Leadership Montgomery increases their awareness of the county's resources and the need for young leaders to become actively involved.
- Cooperative Extension has hired an agent, housed in Moore County, to work with agriculture agents in the 11 counties affected by the changes at Fort Bragg- BRAC. This person will serve as a Regional Agricultural Sustainable Program Agent with grant funding over a 3 year period. Cooperative Extension assists with the Emergency Preparedness Committee to assess the damage to agriculture after disasters, as well as extreme weather conditions. Initial efforts have been made to establish a County Animal Response Team. The new Livestock Agent will be working on this during the coming year.

Appendix C: Montgomery County Social Services Specific Data

Source: Information extracted from 2009 Montgomery State of The County
Montgomery County Department of Social Services

ADULT SERVICES PROGRAM

2008 Accomplishments

1. Restructured Adult Services Unit to better serve the needs of our clients.
2. Continued cross training for Social Workers in mandated programs.
3. Social Workers attended required state training for new duties.
4. Reassigned caseloads of Adult Care Homes and Family Care Homes to better monitor the facilities.
5. Participated in ongoing community meetings with law enforcement, adult care home staff, and mental health professionals.
6. Obtained a Ford Escape for staff travel.
7. Developed presentation and resource material, and participated in Annual Senior Fun Day sponsored by the Troy/Montgomery Senior Center.
8. Annual Oversight Review of Adult Care Homes and Family Care Homes completed successfully.
9. Continued to assist senior adults with emergency needs such as food, fans, air conditioners and other critical items.
10. Staffed cases every other week with Adult Services Staff, which also includes in-house training.
11. Assisted with development and implementation of Enhanced Medicaid Transportation Program.

Child Support Enforcement Program

Accomplishments for 2008:

1. Number of children with paternity established in total cases 1,165
2. Montgomery County exceeded goal of 106.3% by 1.3%
3. Montgomery County had 107.6% of children with paternity established
4. Montgomery County has 1,374 active child support cases
5. Montgomery County has 1,308 cases under a court order for support
6. Montgomery County exceeded goal of 92.9% by 2.3%
7. Montgomery County has 95.2% of cases under a court order
8. Montgomery County ranked #1 in NC out of 88 NC child support offices for cases under order.
9. The state average for cases under order in 2008 was 81.7%
10. Montgomery County collected 74.0% of all current support obligations owed to cases
11. Montgomery County reached goal of 74.0%
12. Montgomery County has 1,246 cases that have arrears owed to case
13. Montgomery County collected a payment toward arrears in 911 of those cases, 73.1%
14. Montgomery County did not meet goal of 73.3% by -.2%

Total child support collections goal for Montgomery County for FY 2007-2008 was \$2,639,431.00. Montgomery County collected a total of \$2,697,699.00 and exceeded goal by 2.2%

Montgomery County established 1,441 income withholdings, 148 new child support orders and 99 paternities.

Montgomery County was ranked 18th overall for North Carolina out of 88 NC child support offices.

The Montgomery County child support unit consists of 5 agents, 1 processing assistant, and 1 supervisor.

Child Protective Services Unit **Accomplishments for 2008**

During 2008, the CPS Unit experienced an increase in the number of CPS reports received, and the overall number of cases / families worked with, in all CPS duty areas. Through the diligence and hard-work of the CPS social workers assigned to the unit, the required duties and service provisions have been efficiently and professionally performed. This occurred during a period of approximately 3 months in which the CPS Unit experienced a staff shortage due to employee turnover, requiring a larger, more intensive, and demanding workload for the remaining social workers. The CPS Unit weathered the staff shortage, and is now back to full-staff.

In 2007, the CPS Unit:

- A. Received and screened a total of **304** CPS reports.
- B. Accepted **200** of the 304 reports for Assessment. 62 were assessed as Investigative Assessments and **138** were assessed as Family Assessments.
- C. Performed **21** Courtesy Assists for other counties.
- D. Filed **10** juvenile petitions with the court.
- E. Provided CPS In-Home Services for **34** cases.

Through December 16, 2008, the CPS Unit:

- A. Received and screened a total of **319** CPS reports, year-to-date.
- B. Accepted **211** of the 319 reports received year-to-date, for Assessment. **48** were / are being assessed as Investigative Assessments, and **163** were / are being assessed as Family Assessments.
- C. Performed **33** courtesy assists for other counties due to intra-county conflicts, year-to-date.
- D. Filed **11** juvenile petitions with the court, thus far.
- E. Provided / are providing CPS In-Home Services for **35** cases, year-to-date.

Administrative actions included the following:

Converted the new DSS-5010 CPS Assessment Documentation Forms to a computer-fillable format. These forms were developed in June of this year by the State to make documentation more consistent throughout the state. Making them computer-fillable makes them more efficient to use.

Developed and implemented a CPS Assessment Initiation Packet to be used by assigned case social workers as well as the on-call social workers. The purpose is to insure that all the needed case initiation steps, information and mandates are met. If the case is initiated by another social worker, such as during on-call, it is a guide for that initiation, even if the social worker is not a CPS unit social worker. It also provides a consistent format to pass the case information on to another social worker for completion.

Had all CPS forms that are used in the field, that require signatures, or that copies are provided to the family, printed with NCR paper to make the use of carbon paper no longer necessary and make the processes more efficient.

Foster Care & Adoption Program

Accomplishments for 2008

1. Continue to maintain a 42% increase of foster homes in the county.
2. Continued to pass and exceed all State & Federal Program Reviews and Audits
3. Found permanence for majority of eligible children in foster care and again meet the State challenge by 75%
4. Had a reduction in the length of time in out of home placements for children in DSS custody
5. Finalized all eligible adoptions
6. All eligible youth who were in DSS custody from age 13-21 participated in the LINKS Independent Living Services Program
7. Initiated and maintained effective collaboration with community partners
8. Had a 85% increase in services provided to private & step-parent adoption cases
9. Agreed to provide Adult Adoption Intermediary Service.
10. Has a Intake Social Worker who provide Intake duties and facilitate mandated MRS requirements for Child and Family Team Meetings

Food & Energy Assistance Program

Accomplishments for 2008:

1. Unit met all State & Federal processing standards (considerable overtime necessary)
2. Unit had no overdue emergency applications (considerable overtime necessary)
3. 100% payment accuracy
4. 100% negative accuracy
5. County Participation Rate: 64.09% (State average 70.36%)
6. December 08 Caseload Size 1876 – Historically largest caseload to date)
7. CIP Energy Assistance: 595 applications taken; \$124,446 approved
8. Energy Neighbor Funds: 16 applications taken; \$2,809 approved
9. 2008 Fraud Collections: \$37,175 (Part-time due to lack of staff)
10. 2008 Fraud Incentive Money returned to county: \$8,689
11. Fraud Referrals: 92

Medicaid (Medical Assistance) Program

Accomplishments for 2008:

The Medicaid Unit of the Department of Social Services met the challenges of 2008 with limited staffing of one supervisor and eleven caseworkers. Unfortunately we lost two experienced workers and a Supervisor this year due to retirement and interoffice advancement. The Adult lead worker was promoted to Supervisor. We now have four new employees being trained in the Adult Medicaid part of the unit. We have six caseworkers that administer the Adult Programs and five workers that administer the Family and Children's Programs.

November 2008 a new Adult Medicaid program was implemented. Health Coverage for Workers with Disabilities (HCWD) provides an incentive for persons with disabilities to go to work or to increase their hours of work, while protecting their Medicaid eligibility.

The end of the year brought the annual cost of living adjustments for all our aged, blind or disabled Medicaid cases. All of our cases that have individuals receiving Social Security, SSI or Veteran's benefits must be reviewed for changes in situations that could affect the recipient's Medicaid benefits. These cases were reviewed and necessary changes implemented. Also, the annual re-enrollment of the MQB-E program (Limited Medicaid for Qualified Beneficiaries) had to be done during the month of December 2008 after legislation was passed in the final hours to extend the program. These cases were reviewed and updated accordingly.

November 2008 (75) cases were sent to Raleigh for State review by the State Monitoring team. All compliance thresholds were met and we will not have to be monitored again for two years. There were three cases cited for documentation problems and these cases have since been corrected. Also in November 2008, the State Quality Assurance team conducted the Corrective Action Record Review (CARR) on site here in the county.

No eligibility errors found and records were noted to be well organized and very well documented.

DSS must administer the Medicaid programs in a timely and efficient manner. The unit is monitored monthly by the State to see if report cards are passed and time standards are met. We are also monitored annually or bi-annually via record review to the Division of Medical Assistance monitoring staff to ensure compliance with, acceptance of and disposition of applications without delay. Frequency of this monitoring is determined by the agency's performance on the monthly report cards. DSS is measured on the average processing time and the percent of applications that were processed timely. The Medicaid Unit must achieve a certain "standard" to have "passed" the adjusted report card for the month. These report cards were passed January thru December 2008 for Regular Medicaid.







During January thru December 2008, the Medicaid Unit took and processed 2,893 applications for Medicaid and Special Assistance. The unit approved 2,281 of these cases while denying assistance for 599 applicants. The unit also maintains approximately 4,700 active and ongoing cases monthly.

Work First Program


Accomplishments for 2008:

Work First is about helping families achieve self-sufficiency-helping adults support themselves and provide for their children. Work First promotes personal responsibility and employment. To help families reach their self-sufficiency goals, Work First provides employment services, other supportive services, and time-limited cash assistance to families with children under age 18. The family is referred to child support to help get additional financial support for the children. If eligible, the family may also receive Medicaid. A family must meet income, resource, and citizenship rules.

Work First and Employment Services Goals and Performance Measures report Year to Date data for State Physical Year ending 6/30/2008 are as follows:

Outcomes	Annual Goal	YTD Actual	% of YTD Goal Met	Comments
Adults Entering Employment	14	18	128.57%	 !
Remaining off Work First for Employment	90%	97%	107.78%	
Providing Employment Services: All-Parent	80%	70%	93.48%	
Providing Employment Services: Two-Parent	100%	100%	100%	
Meeting All-Parent Participation Rate	50%	25.29%	50.58%	Strive to increase!
Meeting Two-Parent Participation Rate	90%	87.50%	97.22%	
Employed 6 Months After Leaving Work First	60%	70%	116.67%	

This chart below reflects the November 2008 Work First Program Performance Report. We no longer have the list of goals that we have had for years. The only goals that we will have are the participation rates (all families – 50%; 2 parent—90%) The other goals as we know them will become county performance measures.

Outcomes	Goal	YTD Actual	% of YTD Goal Met	Comments
Meeting All-Parent Participation Rate	50%	6.01%	12.02%	Strive to increase!
Meeting Two-Parent Participation Rate	90%	100%	100%	

Work First Benefit Diversion: Benefit Diversion is an alternative to Work First Family Assistance. A family that qualifies for Benefit Diversion is provided:

1. A one-time cash payment of up to 3 months of Work First benefits. Cash payments stop
2. after this one check.
3. Up to 3 months of Medicaid
4. Child care, transportation, and work-related expenses, if needed; and
5. Child support services and referrals to other community and agency services.

While benefit Diversion is not appropriate for all families, it provides immediate help to families who are employed, soon-to-be-employed, between jobs, or who anticipate receiving financial assistance in the near future, whether or not related to employment, that will help meet their needs. This financial assistance may include child support, an inheritance, insurance settlement, etc. Benefit Diversion is to help families who need one-time, temporary assistance.

Work First Services for Low-Income families (Below 200% of Poverty)

These services may be provided to any family that currently does not receive a Work First check with income at or below 200% of poverty, provided there is a child in the household who meets the age, kinship, and citizenship/alienage rules.

Work First Child Care Subsidy Program **Accomplishments for 2008:**

Each county receives funding from the NC Division of Child Development for subsidized child care services to help families pay for child care. To qualify, family income must be within the income guidelines based on family size. Most families who are Work First recipients qualify for financial assistance to help with child care expenses. Families that need child care to work or attend school are required to pay a fee based on their gross countable monthly income and the number of people in the family. The family pays only one fee, regardless of the number of children in care.

Parents are free to choose the type of licensed child care arrangement they wish to use. Information is provided about how to select a child care center or home and the star rated licensing system.

Montgomery County allotment for SFY 2007-2008 was \$956,038. The average compliance percentage for the summary of findings for the Subsidized Child Care Program was excellent at 97.78%. The purpose of the child care caseworker is to provide subsidized child care assistance to the Subsidized Child Care, Smart Start Child Care, and Head Start Wrap Around population. The caseworker enrolls child care providers in the Subsidized Child Care System, determining eligibility, coordinating payment, and conducting outreach activities. Client's child care needs are assessed and a daycare application is completed. The Child Day Care program receives referrals from the Head Start Wrap Around program and the Developmental Day center in addition to interagency referrals from Child Protective Services.