



2026-2029 Strategic Plan

Signature Page

This plan has been approved and adopted by the following individuals:



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Date

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Agency Overview

Goodhue County Health and Human Services (GCHHS) is an integrated public health and human services agency. Since combining in 2010, we've seen how interconnected our work is. The department has three service divisions—Economic Assistance, Public Health, and Social Services—supported by Finance & Office Supports. As of 2026, we have 133 staff dedicated to serving Goodhue County residents. As an example of connections, child support payments from the Economic Assistance Division and family home visiting from the Public Health Division have both been shown to reduce the risk of child maltreatment reportable to the Social Services Division. Each division contributes protective factors that prevent crises and promote wellbeing. Our mission includes protecting individuals to keep them safe, and we also provide as much early intervention and prevention as we can. We are an integrated system with heavy emphasis on prevention at both the community and individual levels.

Our agency strives for continuous improvement toward national standards. We have been accredited by the national Public Health Accreditation Board (PHAB) since 2019, most recently reaccredited in November 2025. We apply PHAB's framework of foundational public health services agency-wide. Public health staff strengthen human services through foundational best practices in communication, community partnerships, data, and more. Recent examples include informing the public about federal benefit changes, supporting evaluation of the Incredible Years program, and helping the Adult Mental Health Initiative attract more grant applications.

We provide a wide range of services across the lifespan—from public health education and policy, to child and adult protection, to economic assistance, mental health and substance use case management, and support that helps older adults and people with disabilities live as independently as possible. We work with state, regional, and local partners. Our philosophy is prevention-focused and trauma-informed, and we try to reduce silos so staff can collaborate across programs.

GCHHS is governed by the Goodhue County Health and Human Services Board, which serves as both the Community Health Board and the local Social Services Agency under Minnesota Statutes 145A and 393. The board includes five county commissioners and two lay members who help shape our strategic direction and ensure accountability.

Mandates and Purpose of Strategic Planning

Fifty years ago, Minnesota's Local Public Health Act of 1976 established a State Community Health Services Advisory Committee (SCHSAC) and began the partnership between the Minnesota Department of Health (MDH) and local governments. Since 2011, on the recommendation of SCHSAC, the Minnesota Department of Health has required community health boards to submit a strategic plan.

The Public Health Accreditation Board (PHAB) standards and measures also require a strategic plan and provide additional guidance. HHS Public Health Division wrote the first strategic plan in 2012-2015. The whole, integrated agency had strategic plans for 2016-2020 and 2020-2025. A strategic plan informs the other plans and programs of a department.

The development of the 2026-2029 plan was driven by an organizational assessment that included key informant interviews and a review of other GCHHS plans, performance data, the 2025 employee engagement survey, and financials. By proactively identifying areas for growth and improvement, the department can focus on strengthening our workforce, internal processes, and community trust.

The strategic plan is a critical tool for ensuring the department operates efficiently, makes informed decisions, and remains adaptable to future challenges. This plan defines the current strategic direction. These priorities will support decision-making, optimize resources, and guide internal actions to support long-term success.

This plan also supports alignment between daily operations and long-term goals, ensuring that all staff and agency committees understand how their work contributes to broader organizational success. It serves as a living document—one that will evolve as new challenges emerge, reinforcing the department's ability to respond effectively while maintaining a strong foundation for decision-making.

By using this plan as a guide, Goodhue County Health and Human Services is committed to delivering excellent services, fostering a culture of accountability, and continuously improving and adapting to meet future needs.

A Strategic Plan:

- ✓ **Defines Direction:** Establishes the department's vision and goals for the future.
- ✓ **Supports Decision-Making:** Guides resource allocation and prioritization of initiatives.
- ✓ **Drives Accountability:** Tracks progress and measures success with transparency.
- ✓ **Enhances Adaptability:** Ensures the department can respond effectively to emerging public health challenges and opportunities.

Components of the Strategic Plan

The components of the Strategic Plan build on one another like a pyramid.



Glossary of Terms

Strategic Planning – a process for defining and determining an organization's roles, priorities, and direction (PHAB, Reaccreditation version 2026 Standard 10.1).

Mission – defines the organization's reason for existence and its core purpose.

Vision – outlines the organization's aspirational future state.

Values – fundamental beliefs/principles that guide the organization's actions and decisions.

Organizational Assessment – input from key partners and staff, performance data, and changes and progress since the last Strategic Plan.

SWOT Analysis – assesses the overall situation and identifies driving forces that can affect advancement of the mission and achievement of the vision.

Strategic Priorities (the what) – broad, high-level, current opportunities to advance the mission and move towards the vision.

Strategies (the how) – approaches or initiatives to achieve the priorities; feasible, specific enough to be implemented, and consistent with our values.

Plans or Action Plans – specify how we will carry out each strategy over the next 3 years with tasks, due dates, and assigned staff. Plans will be monitored in Microsoft Planner.

Mission, Vision, and Values

Mission, vision, and values provide a framework for the strategic plan.

- **Mission** defines the organization's reason for existence and its core purpose.
- **Vision** outlines the organization's aspirational future state.
- **Values** are fundamental beliefs/principles that guide the organization's actions and decisions.

The strategic plan committee recommended no changes to the mission adopted by the HHS board in 2012 but revised the vision statement to better describe the aspirational future. The committee sought feedback at team meetings about changes to the values, and the new order signifies which values resonated most with staff.

Our Mission:

Promote, Strengthen and Protect the Health of Individuals, Families and Communities

Our Vision:

A safe and healthy Goodhue County, built on trusted service and strong community partnerships

Value Statements:



Compassion

We practice compassion, respect, and kindness for all people and deliver culturally appropriate services.



Collaboration

We value collaboration through authentic engagement and partnerships with the individuals, families, and communities we serve.



Prevention

We prioritize prevention as a cost-effective long-term investment, focusing on early interventions, healthy living, and addressing root causes.



Excellence

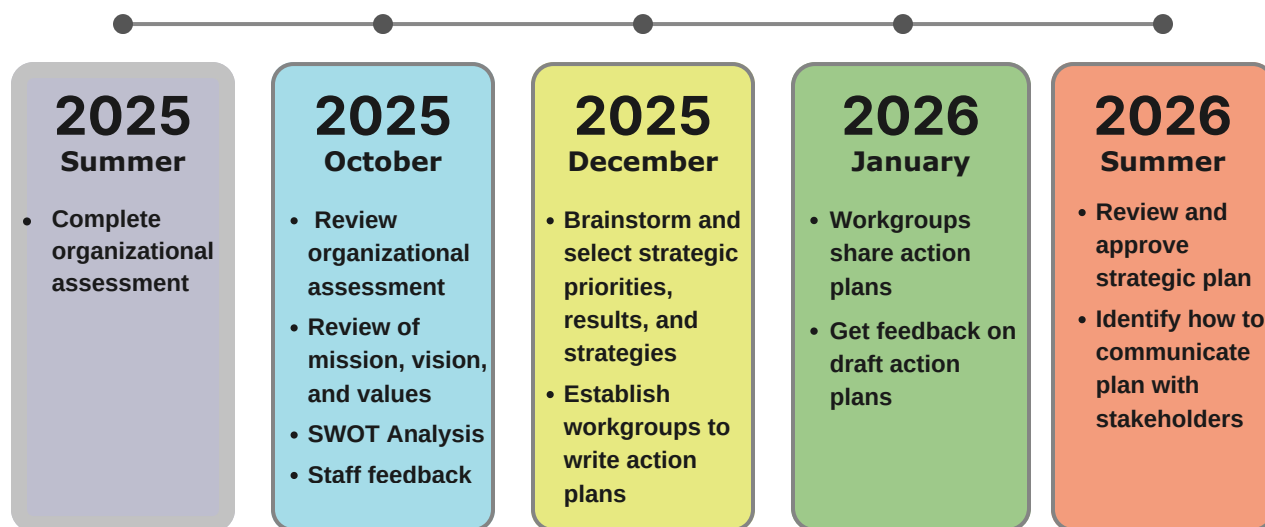
We ensure a high level of quality, integrity, and efficiency in our public service through evidence-based practices and innovative ideas.

Tribal Sovereignty

As an integral part of our value to collaborate with the communities we serve, we collectively acknowledge that our service area falls within the traditional homelands of the Dakota people. These lands continue to hold great historical, spiritual, and personal significance to not only the Mdewakanton Band of eastern Dakota but to other Indigenous nations that still hold an affirmation to this valued and treasured landscape that we all share and occupy to date. This acknowledgment recognizes and supports the unique relationship that the state of Minnesota holds with Indigenous nations and by offering this land acknowledgment, we affirm Tribal sovereignty and hold ourselves accountable to the sovereign Indigenous people and nations we provide services to.

Strategic Planning Process

Below is a timeline of the strategic planning process. The GCHHS Leadership Team established the members of the 2026-2029 GCHHS Strategic Plan Committee in fall 2025, and the committee met from October 2025- January 2026. Three workgroups, one for each strategic priority, drafted objectives and actions with target dates and began to implement these action plans in January 2026.



Organizational Assessment

To develop this Strategic Plan, GCHHS conducted an organizational assessment. The Data Analyst/Healthy Communities Team Lead Maggie Cichosz interviewed leaders of partner organizations, analyzed the 2025 employee engagement survey, and summarized GCHHS plans, performance data, and financials. This data was presented at the first 2026-2029 strategic plan committee meeting in October 2025. Discussion of the assessment led to identification of the following initial themes at the first meeting:

- ✓ Communication—interagency, and with community (public awareness)
- ✓ Changes, including Medical Assistance
- ✓ Visibility in public, Invisible
- ✓ Support—internal, external, managerial
- ✓ Internal employee morale
- ✓ Staff retention, training
- ✓ Lots of aspirations/priorities. Ambition. Concise vs. comprehensive.
- ✓ Process improvement
- ✓ Integrated—communication, finances, staff training
- ✓ Hire quality professionals/skilled workforce

Using the identified themes, the committee conducted a Strengths, Weaknesses, Opportunities, and Threats (SWOT) Analysis and shared it at team meetings for feedback about what seemed to be missing or unclear. Committee members communicated via a Teams channel and email, revising the analysis based on staff input. Revisions based on staff input are shown in underlined text.

Strengths

Internal

- **Size of the county** – not too big, not too small; people know each other; staff have local personal connections
- **Motivation to serve the community well**—includes internal staff collaboration, being advocates, being forward-thinking, aspirations, people caring about the people they serve and the colleagues they work with
- **Skilled professionals**—staff bring years of service and compassion; leaders promote work-life balance
- **Responsive to feedback and willingness to change**—improvements to onboarding are an example

Weaknesses

- **Inconsistent internal communications** – programs and systems lack processes for staff to share info, especially IMU
- **Lack of role clarity**—need more than an org chart; need to understand how we fit together. Past onboarding has been unstructured and unclear.
 - leads to missed communication among units
 - Limits process improvement (for shared processes)
 - contributes to issues with coverage and with **retention**
- **Limited capacity** – turnover, siloes, complex systems, overwhelming workload, limited coverage for absences, and uncertainty from external threats lower morale. Some have an “immobilizing sense of gloom”

Opportunities

External

- **Strong hiring pool** – recent layoffs have expanded the candidates available (although rural location limits hiring and retention of those not nearby)
- **Technology modernization** –AI and integrated tools like SharePoint, Teams, and OneDrive
- **Relationships** among employees and community members
- **Increasing our visibility** in the community is desired by our partners
- **Partnerships with other organizations to share resources** in response to funding shifts

Threats

- **Changes in government policy, programs, funding**
 - fraud forced the shutdown of Housing Stabilization Services program
 - scrutiny on non-mandated services (like prevention-focused services core to our mission)
- **Complex and increasing crises** with housing, substance use, transportation, economic stability and an aging population need to be addressed quickly and with flexibility
- **Limited and dwindling community resources** –example: nursing home beds. Low service volume limits sustainability of some rural services (youth substance use treatment, therapists, day treatment)
- **\$\$\$\$\$**—uncertainty, loss of funding

Strategic Priorities and Strategies

The table on the next page summarizes our strategic priorities.

- **Strategic Priorities** (the what) are broad, high-level areas where there is a current opportunity to advance the mission and move towards the vision.
 1. **Promote Staff Well-Being**
 2. **Standardize & Communicate Processes**
 3. **Increase Community Awareness of HHS**
- **Strategies** (the how) are approaches or initiatives to achieve the priorities. They are feasible, specific enough to be implemented, and consistent with our values.
 1. Build a Positive Culture
 2. Build Agency-Wide Proficient Use of Office 365
 3. Spotlight HHS Workers to Build Trust
- **Results** answer the question, "What would HHS or the community look like if we were 100% successful in achieving the priority?" and are not measurable.
- **Objectives** answer the question, "Who will do what by when?" and are specific, measurable, actionable, realistic, time-bound, inclusive, and equitable.
- **Performance Measures** answer the questions "How much did we do?" "How well did we do it?" and "Is anyone better off?"

Underlying these priorities are the mission, vision, and values that describe our agency's identity, and the SWOT analysis describing the current moment. At the December 2025 meeting, the strategic plan committee used a consensus workshop to generate and cluster ideas into possible priorities and vote with sticky dots. The committee selected three strategic priorities. For feasibility, the committee limited the number of strategies to one per priority; more can be added if capacity allows. The committee created three workgroups, including committee members and staff volunteers. In December and January, workgroups used Excel spreadsheets to draft action plans, with tasks, due dates, and assigned staff, for each strategy.

- ✓ **Staff Well-Being Workgroup:** Nina Arneson, Kris Johnson, Krista Early, Lisa Oelkers and Anna Kelly
- ✓ **Standardize & Communicate Processes Workgroup:** Kris Johnson, Deb Marty, Debbie Sammon, Lisa Woodford, and Carolyn Badker
- ✓ **Community Awareness Workgroup:** Ruth Greenslade, Natalie Littfin, Lisa Richardson, Jessica Seide, and Gracie Flicek

A more detailed description of each step of the planning process can be found in the meeting minutes saved in the [Strategic Planning Committee](#) SharePoint/Teams channel.

Action plans with tasks and due dates are kept in Microsoft Planner in [HHS – Strategic Plan](#), a separate Teams team, because the shared channel does not support Planner.

Promote Staff Well-Being

Strategy: Build a Positive Culture

Result: Sustain a workplace where every person feels valued, supported, connected, healthy, and empowered.

Objective: From 2026-2029, each calendar year, the HHS Workforce Development Committee will coordinate with PAUSE, Equity Committee, and others to offer at least 3 staff wellness activities that build connection and belonging, 3 activities that boost morale, and 3 activities that reduce stress.

Performance Measures:
 # planned tasks completed
 % planned tasks on time
 # staff wellness activities offered
 % staff who feel sense of belonging at HHS
 % of staff who feel morale is positive most of the time
 % of staff who feel adequately supported to manage work stress

Standardize & Communicate Processes

Strategy: Build Agency-Wide Proficient Use of Office 365

Result: Our staff confidently uses tools and technology policies and procedures to do their work efficiently and effectively.

Objective: From 2026-2029, each calendar year, the Office Services Supervisor, Information Specialist Sr., and HHS Directors will identify at least 3 Office 365 core competencies in which all staff need to demonstrate efficiency and implement at least 1 training tactic for each competency.

Performance Measures:
 # planned tasks completed
 % planned tasks on time
Proficiency measures to be developed

Increase Community Awareness of HHS

Strategy: Spotlight HHS Workers to Build Trust

Result: Every resident trusts Goodhue County Health and Human Services and recognizes the services available through us.

Objective: From January 2026 through December 2027, the Community Awareness workgroup (co- led by the Communications Specialist and Child Support Lead Worker) will develop and implement a storytelling and outreach initiative that features at least 12 HHS staff profiles, shared across multiple channels (e.g., website, social media, print newspapers).

Performance Measures:
 # planned tasks completed
 % planned tasks on time
 # staff profiles created
 # impressions per channel (e.g. website & social media)
 % of public comments on HHS worker spotlights with positive or neutral sentiment

Plan Alignment

Strategic planning focuses on the whole HHS Department, not any one division or individual program. The strategic plan integrates with other department plans and initiatives, ensuring a coordinated approach and strengthening accountability.



- **Community Plans** describe local health issues and shared priorities for improving community health. They inform the strategic plan. HHS aligns its work with health priorities from the Community Health Improvement Plan.
- **HHS Department Plans** address areas such as equity, workforce, communication, emergency preparedness, or performance management. The strategic plan informs these plans and guides the work of committees. Strategic Plan tasks are often assigned to leaders of plans and committees.

Examples of how plans fit together related to the “Promote Staff Well-Being” priority:

- ✓ **Community Health Improvement Plan:** This Strategic Plan aligns with the 2026-2028 CHIP priority to “Support Mental Wellbeing.” While the CHIP focuses on community education about Positive Childhood Experiences, chronic stress, and resilience, the HHS Strategic Plan strengthens internal capacity through staff education on these topics.
- ✓ **Workforce Development Plan:** The Workforce Development Committee supports the Strategic Plan “Promote Staff Well-Being” priority by providing staff education on mental wellbeing, as well as by piloting improved training and mentoring for new employees.
- ✓ **Equity Committee:** The Equity Committee aligns with the priority of “Promote Staff Well-being” by creating opportunities for learning, belonging, and collaboration that strengthen an inclusive workplace where all staff feel valued and supported.
- ✓ **Performance Management/Quality Improvement Plan:** Quarterly surveys track staff morale, belonging, and stress management, three performance measures aligned with the “Promote Staff Well-Being” priority. Results are shared with Leadership Team, key committees, and the HHS Board to guide improvements.

Putting the Plans into Action

Using Microsoft Planner for strategic plan action plans allows all committee members and workgroup members to see what tasks are underway, completed or overdue. Tasks are assigned to specific staff, with due dates, providing progress tracking as staff check off completed tasks. Workgroups have the flexibility to add tasks, make minor revisions to tasks, extend due dates, make tasks recurring, and create checklists for their strategy's Plan right in Planner.

Strategy leads will check in quarterly via email or meeting with the Healthy Communities Supervisor. A summary of updates will be posted on the Strategic Planning Committee Teams shared channel and highlights will be shared with HHS supervisors and directors.

The Strategic Plan Committee will meet every six months to hear reports on action plan implementation. A summary of the number of tasks completed for each strategy, the percent of tasks on time, and other performance measures for which data is available, will be presented at Strategic Plan Committee meetings. If strategy leaders identify barriers and recommend changes in direction, the committee may recommend quality improvement methods such as Plan, Do, Study, Act to refine strategies. The committee may approve revisions to the action plan as needed for effective implementation. Any major plan revisions will be noted in meeting minutes, and then the Plans will be updated accordingly in Microsoft Planner.

Acknowledgements



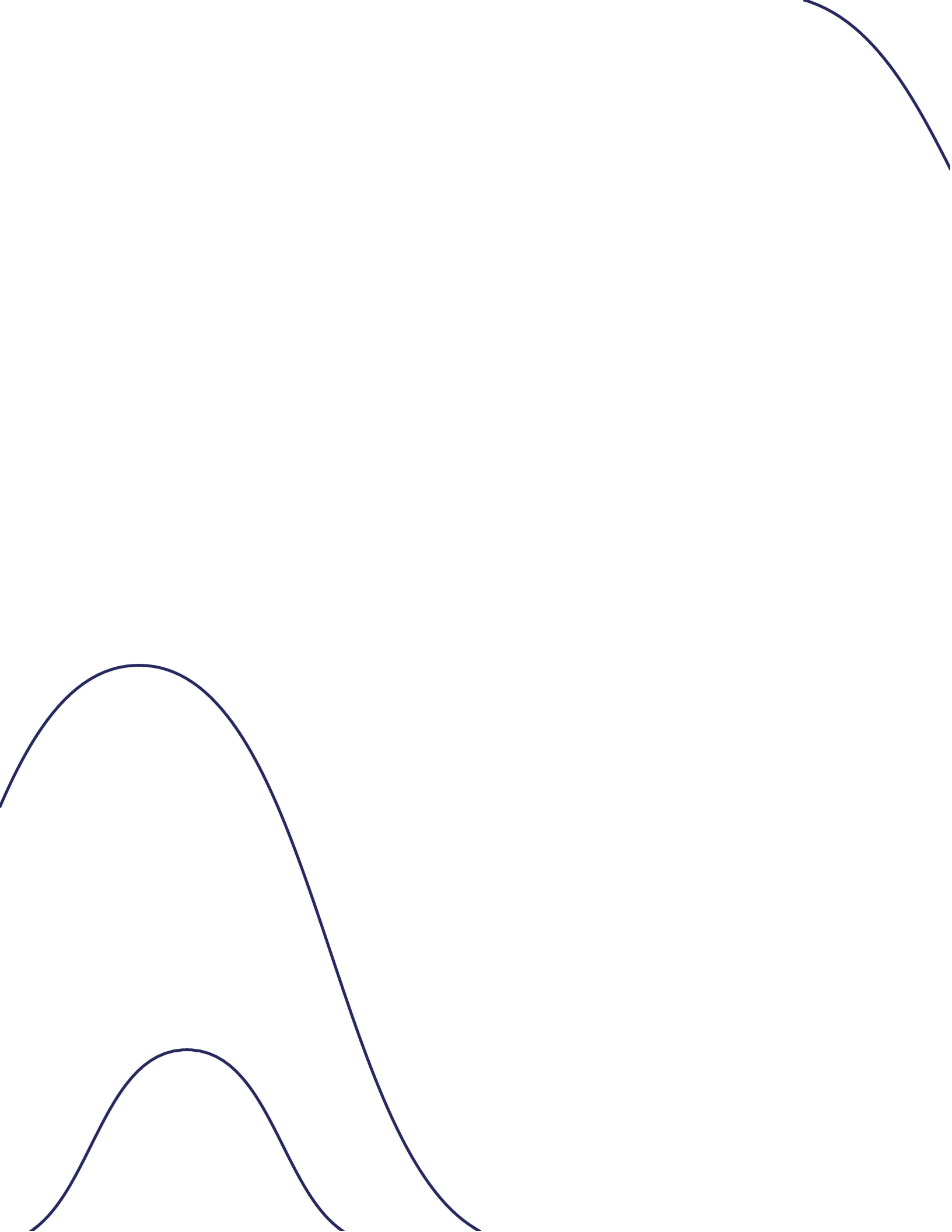
We extend our sincere gratitude to all the staff and stakeholders who dedicated their time, expertise, and insights into shaping this strategic plan. Your contributions have been invaluable in developing a roadmap that strengthens our department's ability to operate efficiently, set clear priorities, and achieve meaningful progress.

We especially acknowledge the following for their contributions:

- **Strategic Plan Committee:**
 - **Nina Arneson**, HHS Director
 - **Krista Early**, Family Health Supervisor
 - **Commissioner Linda Flanders**, Goodhue County HHS Board
 - **Kris Johnson**, HHS Deputy Director
 - **Anna Kelly**, Community Health Specialist
 - **Mark Knowles**, Lead Eligibility Worker
 - **Natalie Littfin**, Child Support Lead Worker
 - **Deb Marty**, Information Systems Specialist, Sr.
 - **Kayla Matter**, HHS Deputy Director
 - **Lisa Oelkers**, HHS Team Lead – Social Services
 - **Lisa Richardson**, HHS Team Lead – Home and Community Based Services
 - **Debbie Sammon**, Office Services Supervisor
 - **Jill Tourney**, Social Worker
 - **Lisa Woodford**, HHS Administrative Lead
- **Facilitators:**
 - **Maggie Cichosz**, Planner- Data Analyst/Healthy Communities Team Lead
 - **Ruth Greenslade**, Healthy Communities Supervisor
- **Subject Matter Experts:**
 - **Hailey Bomar**, Minnesota Department of Health Foundational Capabilities Planner
 - **Mary Orban**, Minnesota Department of Health Public Health System Consultant

Portions of this Strategic Plan were based on the template provided by the Public Health Accreditation Board (PHAB). Portions were generated or revised using Microsoft Copilot based on the GPT-5 model, with a knowledge cutoff of June 2024, in 2025 and 2026.

The collective effort and dedication of everyone involved have been instrumental in creating a strategic plan that will guide the Goodhue County Health and Human Services Department in its mission to promote, strengthen and protect the health of individuals, families and communities.





**Goodhue
County**
MINNESOTA