



## 2017-2019 Strategic Plan Progress Report

### Strategic Priority 1: Promote and Protect Health

Promoting and protecting health is an essential part of our mission statement and a key component of what we do at the health department. It's what public health is all about, and it is part of every program. If we don't do this well, we are not serving the population of Riley County in the way that we need to. Therefore, it is essential that we have a strategic focus in this area.

#### Goal: Promote activity or collaboration within each of the Kansas Foundational Areas of the Foundational Public Health Services Model

Outcome Measures: Number of clients receiving family planning services, maternal and child health services (including WIC and home visiting), and STI/HIV testing and treatment services

<b>Objective 1:</b> By December 2017, develop and implement a comprehensive community-based health promotion and disease prevention plan based on known health risk factors from established data sources		
Actions	Outcome	End Product
Develop a comprehensive community-based health promotion and disease prevention plan	<b>Completed, update as needed</b>	Y:/ Riley County Health Department Health Promotion and Disease Prevention Plan
Approve plan	<b>Completed</b>	
Implement plan	<b>Completed</b>	

<b>Objective 2:</b> Through 2019, host quarterly meetings with Riley County Department of Planning & Development (environmental health) to assure that Environmental Health services such as school inspections and water testing are being provided in Riley County		
Actions	Outcome	End Product
Determine quarterly meeting dates with RC Environmental Health	<b>Completed</b>	Quarterly meetings with RC Planning & Development with Administrator, PHEP Coordinator and Health Educator
Host RC Environmental Health staff at meetings, on a quarterly basis	<b>Ongoing</b>	

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<b>Objective 3:</b> By December 2018, make available an electronic database of community health and social services on the RCHD website		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Participate in monthly meetings with community partners to develop a database	<b>Completed</b>	IRIS (Integrated Referral and Intake System)
Create and implement an Internal and External Referral System	<b>Completed, update as needed</b>	
Provide database link on RCHD webpage	<b>Completed</b>	

<b>Objective 4:</b> By December 2017, determine a baseline number of RCHD clients that receive internal RCHD referrals and external referrals to outside organizations for health, insurance, and social services; and by 2019, increase internal and external client referrals for health, insurance and social services by 20%		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Determine baseline data by checking health records and other reporting forms for both internal and external referrals for services(ranging from clinical to social services)	<b>Completed</b>	Unable to obtain baseline 2017 data, since we did not start IRIS until May 2018. From May 2018 – December 2019, we had 890 outgoing referrals and 869 referrals received.
Determine change in internal and external referrals	<b>In progress</b>	<i>Set goals in 2020 SP for increase from Dec 2019 – 2020.</i>

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<b>Objective 5:</b> By December 2019, increase the number of clients who have received family planning services, maternal and child services (including WIC and home visiting) and STD/HIV testing and treatment by 10% for programs overall		
Actions	Outcome	End Product
Establish a follow-up appointment policy for family planning clients	<b>Completed</b>	IRIS – Riley County Community Standards, to include consent form. As of Dec. 2019, we have 25 partner organizations in MHK, as well as all USD 383 schools.
Make Appointments or follow up with clients met at community outreach events	<b>In progress</b>	<i>Make this a 2020 SP goal to be present at more events with IRIS information.</i>

**Goal: Utilize evidence-based practices to address health risks, health behaviors, disease prevention, and wellness.**

Outcome Measure: Percentage of new programmatic efforts that scientific evidence of significantly changing knowledge, attitudes, intentions, or behavior as determined by scientific literature

<b>Objective 1:</b> By August 2017, gain access to at least one academic database via Kansas State University or other academic institution(s) and subscribe to at least one academic journal		
Actions	Outcome	End Product
Administrative Director submits resume to become adjunct faculty and gain access to academic database	<b>Completed</b>	Access to KSU Library via RCHD Administrator Login
Identify academic journal based on needs and cost	<b>Completed</b>	
Obtain online subscription to identified academic journal	<b>Completed</b>	

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<b>Objective 2:</b> By December 2018, 85% of all new (after the implementation of the strategic plan) programmatic efforts at the health department have scientific evidence of significantly changing knowledge, attitudes, self-efficacy, intentions, or behavior as determined by scientific literature (e.g. peer-reviewed journal articles, meta-analysis, Cochrane database, evidence reviews, etc.)		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Create and maintain a database of research findings	<b>Completed, ongoing</b>	Y:\ Evidence Based Practices – jlist
Research all future (including pilot) programs and services using established literature and knowledge base to determine scope and depth of efficacy	<b>In progress</b>	<i>Roll over to 2020 SP. This task has been assigned to the Health Educator and Director.</i>
Review, approval, and tracking of new programs	<b>In progress</b>	<i>Roll over to 2020 SP. This task has been assigned to the Health Educator and Director.</i>

<b>Objective 3:</b> By December 2018, determine the baseline number of programs, efforts, and services that are evidence-based and by December 2019 increase the programmatic efforts that are evidence based by 20%		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Create and maintain a database of research findings	<b>Completed, ongoing</b>	Y:\ Evidence Based Practices – jlist
Research all current programs and services using established literature and knowledge base to determine scope and depth of efficacy	<b>In progress</b>	<i>Roll over to 2020 SP. This task has been assigned to the Health Educator and Director.</i>
Determine the baseline number of programs that are evidence-based	<b>Not started</b>	<i>Once research is complete, determine baseline.</i>
Determine the increase in programs/services that are evidenced-based	<b>Not started</b>	<i>Once research is complete, determine increase.</i>



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## Strategic Priority 2: Community Outreach and Engagement

Community outreach and engagement is a strategic priority for RCHD because we need to involve the public and our partners in building a healthy community. We do this by working together to improve health, developing healthy policies, and providing education about healthy living. We also strive to ensure that our community members know about and value what we do at the health department. When the Riley County community thinks about healthy living, we want them to think of RCHD as a leader.

### Goal: Expand and strengthen relationships with community partners

Outcome Measures: number and percentage of organizational community partners

<b>Objective 1:</b> By April 2017, develop an official list of organizational partners and identify areas where additional partners are needed		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Each RCHD program submits a list of organizational partners to Administrative Assistant II	Completed	Y:\Community Partners Database
Compile list of organizational partners	Completed	
Review list and discuss areas where additional partners are needed with suggestions for possible additions	Completed	
Revise list and send e-mail for Leadership Team review and return	Completed, ongoing (updated as needed)	
Distribute to HD staff	Completed	

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<b>Objective 2:</b> By December 2017, facilitate annual meetings with community partners to share information and discuss community and regional health issues		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Plan Annual Community Meeting: determine budget, location, date (Sept.), time, agenda, and presentations	<b>Completed, ongoing</b>	Y:\Meetings\Meetings_2017\Community Meetings\Community Day
Send invitations	<b>Completed, ongoing</b>	Y:\Meetings\Meetings_2018\Community Meetings
Compile RSVPs	<b>Completed, ongoing</b>	Y:\Meetings\Meetings_2019\Community Meeting
Host Annual meeting	<b>Completed, ongoing</b>	

**Goal: Develop strategies to improve communication with partners and the public**

Outcome Measures: number and percentage of attendees at Public Health Advisory Council (PHAC); number of percentage of Everbridge users opting into Health Alerts

<b>Objective 1:</b> Increase public attendance at PHAC meetings to 10 people each year by December 2019		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Send email invite to community partners  Announcements on RCHD Facebook, website, and Everbridge  Create database to track PHAC attendance	<b>Not started</b>	<i>Will add this as a goal in 2020 SP. Current PHAC members, and all RCHD staff will be responsible for recruiting.</i>

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<b>Objective 2: 18% of Everbridge users opt into Health Alerts by July 2019</b>		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Identify key public health personnel to develop protocol for Public Health (PH) Alert notifications and provide them access to Everbridge	<b>Completed</b>	The most recent public health alert (back to school immunizations) was sent to a total of: <b>6,643 contacts</b>
Develop Health Alerts in Everbridge	<b>Completed</b>	
Go live with notification system by publicizing Public Health Alert notification availability and instructions for signing up to all current users	<b>Completed, ongoing</b>	
Re-advertise availability of PH alert notifications on a pre-determined schedule set forth in the protocol	<b>Completed</b>	
Monitor increase in access to PH Alert notifications	<b>Completed, ongoing</b>	

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<b>Objective 3:</b> Develop a coordinated organizational branding strategy for the development and distribution of health department informational materials by July 2017		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Form a committee to explore and evaluate the current RC and RCHD branding policies	Completed	Y:\Branding
Investigate branding policies from other health departments	Completed	
Organize, format, integrate and edit the branding strategy for RCHD	Completed	
Present branding strategy to Strategic Planning Team	Completed	
Present branding strategy to RC Department Heads for review	Completed	
Present branding strategy to Board of County Commissioners (BOCC)/Board of Health (BOH) for approval	Completed	
Implement branding policy Department wide	Completed	

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<b>Objective 4:</b> Develop and implement a policy for notifying the public of health concerns by December 2017		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Develop policy and present to Leadership Team	<b>Completed, update as needed</b>	Y:/Comprehensive Community-based Health Promotion and Disease Prevention Plan (2017-2019) – outlined and defined in the “surveillance” section.
Present policy to RC Department Heads for review	<b>Completed</b>	
Present policy to BOCC/BOH for approval	<b>Completed</b>	
Present to RCHD Staff	<b>Completed</b>	

**Goal: Advocate and educate for a health in all policies (HiAP) approach to decision-making**

Outcome Measure: Percentage of RCHD staff and PHAC members able to recognize two HiAP approaches

<b>Objective 1:</b> By July 2018, 95% of the Health Department staff and PHAC members will be able to recognize 2 HiAP approaches		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Review and approve HiAP online training to include an evaluation	<b>In progress</b>	<i>Will add to 2020 SP with the following actions:</i> <ul style="list-style-type: none"> <li><i>PHAC and BOCC/BOH members will complete training</i></li> <li><i>Present information to PHAC &amp; BOCC/BOH members</i></li> </ul>
ALL RCHD staff will complete training; PHAC and BOCC/BOH members will also be encouraged to do so.	<b>Completed</b>	
Evaluate results from online training	<b>In progress</b>	
Present information to PHAC and BOCC members	<b>Not started</b>	

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<b>Objective 2:</b> By December 2019, present a draft resolution to the BOCC/BOG that indicates a commitment to HiAP		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Research existing HiAP resolutions	<b>Not started</b>	<i>Will add this to 2020 SP as a goal.</i>
Prepare the draft Resolution	<b>Not started</b>	
Review and approve Resolution	<b>Not started</b>	
Send draft resolution to County Counselor for Review	<b>Not started</b>	
Present the draft resolution to the BOCC/BOH	<b>Not started</b>	

### **Strategic Priority 3: Quality and Sustainability**

At RCHD, we are building a culture of quality improvement, always aiming for the best in all that we do. In order to best serve our community, we must focus on efficient and effective operations. We achieve our goals by optimizing our use of technology and having a strong focus on measuring and achieving our goals. Providing quality public health services helps us to maintain a positive image in the community and with our funders. These help us to ensure sustainability of the public health department well into the future.

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**Goal: Integrate continuous quality improvement into organizational practices, processes, programs, and interventions**

Outcome Measures: Approval of an RCHD Quality Improvement Plan; Completion of quality improvement projects by each RCHD program

<b>Objective 1:</b> By June 2017, the Health Department will have adopted a quality improvement (QI) Policy and Plan		
Actions	Outcome	End Product
QI Team submit plan to Leadership Team	Completed	Y:\Quality Improvement
Leadership Team reviews/provides feedback	Completed	
QI Team completes revisions	Completed	
Final review by Leadership Team and adoption	Completed	

<b>Objective 2:</b> By September 2017, the QI team will educate and train all staff on the QI Plan, system, and roles and responsibilities within the system		
Actions	Outcome	End Product
Request time at September quarterly in-service meeting	Completed	Y:\Meetings\Meetings_2018\Quarterly In Service Meeting\Minutes (11 September 2018)
QI team meets bi-weekly to plan training	Completed	
QI team provides training to staff at quarterly in-service	Completed	



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<b>Objective 3:</b> By July 2018, each RCHD program will identify a QI project and receive approval from the QI team		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Identify QI project using guidelines in QI plan	Completed , ongoing	Y:\Quality Improvement
Complete project proposal form	Completed, ongoing	
Submit to QI team		
Project proposals are reviewed and approved	Completed, ongoing	

<b>Objective 4:</b> By December 2018, the Health Department director and Insight team will have selected a new electronic health record (E.HR) system for implementation by December 2019		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Identify the needs and wants for a new HER	Completed	EZMRX
Research HER software.	Completed	
Select most cost effective product that meets identified needs.	Completed	
Include cost of HER in 2019 budget or submit for a Capital Improvement Project for approval by the BOCC	Completed	
Procure financing and purchase software.	Completed	
Relevant staff receive training on new HER	Completed	

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<b>Objective 5:</b> By December 2019, each RCHD program will have completed a full QI project and Plan, DO, Check, Act cycle		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Plan – Do – Check – Act  Submit summary report or storyboard to QI Team.	<i>In Progress</i>	<i>Will add to 2020 SP</i>

**Goal: Achieve Public Health Accreditation Board (PHAB) Accreditation**

Outcome Measure: Achievement of PHAB Accreditation

<b>Objective 1:</b> By June 2017, the health department director and health educator will make a presentation to the BOH during the BOCC meeting on the value, benefits, and full process of applying for Public Health Accreditation and obtain board approval to submit registration to inform PHAB of the health department’s intention to apply		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Inform BOH of accreditation activities at monthly reports	<b>Completed</b>	Y:\Accreditation
Develop presentation	<b>Completed</b>	
Present to BOH and obtain approval to submit intent to apply	<b>Completed</b>	

<b>Objective 2:</b> By March 2018, the health department will have completed and documented all pre-requisites and submit an application and fee to the accreditation board.		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Complete and document all pre-requisites	<b>Completed</b>	Y://Accreditation
Submit application and fee to the accreditation board.	<b>Completed</b>	

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<b>Objective 3:</b> By March 2019, the health department will have selected documentation for each PHAB measure (version 1.5) and submitted documentation to PHAB		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Health Educator Completes PHAB-required training	<b>Completed</b>	Y:\Accreditation
Select documentation for each PHAB measure	<b>Completed</b>	
Write cover sheets for each PHAB measure	<b>Completed</b>	
Submit documentation to PHAB	<b>Completed</b>	

<b>Objective 4:</b> By December 2019, the health department will participate in a site visit conducted by PHAB.		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Select site visit dates.	<b>Completed</b>	Y:\Accreditation
Conduct mock site visit.	<b>Completed</b>	
Participate in PHAB site visit.	<b>Completed</b>	

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### Strategic Priority 4: Skilled and Engaged Staff

It's important to have a competent workforce in order to continue operations and provide quality services, which allows us to reach our goals in all areas. We aim to give staff opportunities to develop and grow professionally so that they are performing at a high standard, satisfied with their work environment and passionate about what they do. As a health department, our workforce is our biggest asset in serving the community.

#### Goal: Recruit, hire, retain and train a diverse and competent workforce

Outcome Measures: Proficiency in each of the competencies for public health professionals

<b>Objective 1:</b> By June 2017, adopt an internship policy and procedure to help recruit and train a competent workforce		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Create a draft of the internship policy and procedure	Completed	Y:\Workforce Development\Clinical Experience, Interns, Shadowing and Volunteers
Review the draft with the leadership team for feedback	Completed	
Finalize and adopt the internship policy and procedure	Completed	

<b>Objective 2:</b> Through December 2019, improve recruitment efforts to increase diversity in geography and minority status in the RCHD workforce		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Identify and approve a training on increasing diversity in the workforce for RCHD employees who participate in hiring	Completed, ongoing (update yearly)	Y:\Workforce Development\Professional Development and Training
Develop and approve related policy	Completed, ongoing yearly	
Publicize and track new RCHD employment and internships notices to at least two (2) entities located in diverse areas in Kansas and other state states and to at	Completed, ongoing	



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least two (2) local or regional orgs representing minority groups		
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<b>Objective 3:</b> By June 2018, identify at least one reason of risk factor for employee separation to aid in future employee retention efforts		
Actions	Outcome	End Product
Revise and implement bi-annual employee satisfaction survey to include questions regarding employee retention	Completed, revise yearly	Y:\Worksite Wellness/Employee Satisfaction  Y:\Workforce Development/Separation of Employment
Develop and approve an exit interview survey template for employees departing their position to complete that will include quantifiable questions	Completed, ongoing as needed	
Conduct exit interviews during the final week of employee's departure.	Completed, ongoing as needed	
Use data from exit interviews and employee satisfaction surveys to identify internal risk factors to develop solutions to modifiable concerns.	Completed, ongoing as needed	

<b>Objective 4:</b> Through December 2019, recognize an employee or team of the quarter at in-service meetings		
Actions	Outcome	End Product
Establish guidelines for selection of employee or team of the quarter	Completed, ongoing	Y:\Worksite Wellness\Employee Recognition
Worksite Wellness Team will identify an employee or team of the quarter	Completed, ongoing	

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<b>Objective 5:</b> Through December 2019, each staff member will participate in at least 16 hours of approved job-related professional development		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Create and monitor a training log for staff to document annual trainings	<b>Completed, ongoing (update as needed)</b>	Y:\Workforce Development\Professional Development & Training Certificates\Professional Development Databases
Program supervisors and employees work together to identify and approve professional development opportunities	<b>Completed, ongoing (update as needed)</b>	

<b>Objective 6:</b> By January 2018, create and implement a workforce development plan for current and future RCHD employees		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Revise the Workforce Development Plan	<b>Completed</b>	Y:\Workforce Development
Review Workforce Development Plan with staff	<b>Completed</b>	
Approve Workforce Development Plan	<b>Completed, ongoing (updated yearly or as needed)</b>	
Implement Workforce Development plan	<b>Completed</b>	

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**Goal: Support and facilitate workplace wellness for Riley County Health Department employees**

Outcome Measures: Percentage of health department employees that participate in workplace wellness activities; process evaluation of implementation: items for setoff in plan are being implemented and adhered to

<b>Objective 1:</b> By April 2018, create, pilot, and evaluate a worksite wellness plan for RCHD staff		
<b>Actions</b>	<b>Outcome</b>	<b>End Product</b>
Attend WorkWellKS Foundation Workshop	Completed	Y:\Worksite Wellness
Create a Workforce Wellness Committee and determine roles and responsibilities for Worksite Wellness committee members and appoint members.	Completed	
Revise and implement bi-annual employee satisfaction survey to include questions regarding worksite wellness	Completed, ongoing (plan updated yearly)	
Create a Worksite Wellness Plan based on the based on worksite survey wellness results.	Completed, ongoing (plan updated yearly)	
Pilot and evaluate the Worksite Wellness Plan.	Completed, ongoing	

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