

Walla Walla County Health Department SWOT Analysis for 2011

SWOT Analysis

Strengths

1. Strong educated personnel
2. Filled positions
3. EH staff is fully trained , receiving ongoing improvement
4. Team mentality
5. We have a plan
6. QI start
7. No barriers
8. Commissioners support our effort
9. We look forward; plan
10. We use technology
11. Focus on PH core rather than jumping on the new program band wagon
12. Willing to act on identified gaps in service
13. Encourage community partnerships
14. Service oriented
15. Willing to dig in and solve problems
16. Willingness to admit there's a problem
17. Good sense of humor pervades
18. Low turnover; staff longevity
19. Superb work ethic
20. Mentoring
21. Good service/product
22. Focus on customer
23. Known for innovation and involvement
24. Excellent relations with medical community
25. Good media relationships
26. Outreach to other counties
27. Support to other departments at city and county level
28. Not afraid to fail
29. Programs we do well:
 - WIC
 - Travel clinic
 - ABCD
 - MCH
 - Assessment
 - Flu clinic
 - EH core programs
 - Communicable disease
 - Vital statistics
 - Data/technology support in house
 - Emergency preparedness plan/EM relations

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Weaknesses

1. Lack of time and money to train
2. Prioritization
3. Low depth of staff
4. Lack of critical thinking, don't think through a process before taking next step
5. Management training
6. Don't market well to general public
7. Internal communication
8. Over tasked
9. Under utilize technology
10. Dependent on others for support
11. Furloughs affect flexibility
12. Lobby/front office set up
13. 310 W Poplar
14. Divided office structure
15. Lack of mid level practitioner
16. Small coffee machine, lack of coffee courtesy
17. Kitchen etiquette
18. General office courtesy
19. Don't finish projects
20. Overlapping projects
21. Cubicles and lack of privacy
22. No regional plan
23. Management structure

Opportunities

1. Regionalization of services (for example, provide assessment services to small counties like Columbia, Garfield)
2. Technology
3. Community awareness
4. Changing roles and responsibility
5. Collaboration
6. Prioritization
7. Program integration
8. Streamline work processes
9. Look at program value
10. Revenue enhancement (try to bill for services that have been written off in past)
11. Get out of The Box
12. Open to innovation
13. Open to value of services
14. Continue to lead!
15. Other sources of revenue
16. Public marketing
17. Training
18. Video conferencing as alternative to travel for us and other organizations
19. Bigger coffee pot/espresso machine
20. Volunteer use
21. Community health improvement collaboration

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Threats

1. Budget
2. Insurance
3. Increased demand for services
4. WA Vaccine Association
5. Loss of personnel
6. Changing regulations/rules
7. Higher level of accountability
8. Additional unfunded mandates
9. Next outbreak/disaster
10. Pharmacy immunizations
11. Changes in health care system (use of MAs vs RNs for example)
12. Staff morale
13. Decreased resources for clients
14. Politics
15. Competition from outside contractors, for example
16. Loss of local control