

SAN DIEGO IMMUNIZATION COALITION (SDIC)
STRATEGIC PLANNING RETREAT
November 9, 2009

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MISSION STATEMENT

*The San Diego Immunization Coalition (SDIC)
is a partnership of organizations and individuals committed
to preventing disease and improving the health of the community.*

THREE-YEAR GOALS

(2009-2012 * Not in priority order)

Improve perceptions of vaccines

Increase immunization rates across the life span

Advocate for policy changes that promote immunizations

Achieve a viable and vibrant coalition

S.W.O.T. ANALYSIS

Strengths – Weaknesses - Opportunities - Threats

WHAT ARE THE STRENGTHS OF THE SAN DIEGO IMMUNIZATION COALITION?

Brainstormed Perceptions:

- Education
- Diversity of experience
- Community outreach
- National recognition
- Partnership
- Successful
- Dedication
- Community input
- Inclusive
- Takes action
- VWA—Vaccination Week in the Americas
- Website
- Educational handouts
- Task force for the hepatitis B school law
- Sustainability
- Reputation
- Lifespan immunizations
- Targeting uninsured and underserved
- Recognition of high immunization rates
- Responsive
- Community flu clinics
- Networking
- Registry
- Advocacy
- Email communication
- Expertise
- Keeping immunizations a priority across the community
- Diversity of the actual group
- Longevity
- Collaboration
- Innovation
- Passion and caring
- Professional
- Current and up to date
- Adaptable
- Flu Summit
- Parent forums
- National Infant Immunization Week
- Strategic planning

- Targeted work groups that address specific needs
- Elimination of measles
- Increased awareness of vaccine-preventable diseases
- Provider awards
- International collaboration
- Leadership
- Commitment
- Creative
- Staff support and resources
- Care for children
- Focused outreach

WHAT ARE THE COALITION'S INTERNAL WEAKNESSES/CHALLENGES?

Brainstormed Perceptions:

- Lack of an immediate impact
- Lack of community ongoing education
- Variable and changing participation and commitment
- Lack of accountability structure
- Lack of an action plan
- Lack of reliable funding
- Lack of consumer involvement
- Unwillingness to try new approaches
- Lack of communication
- Lack of staff
- Lack of funding
- Lack of structure
- Perception that San Diego County and the coalition are the same
- Lack of recruitment of new members
- Inconsistent staff participation
- Slow for action to take place
- Lack of social marketing
- Lack of autonomy
- Too broad of an objective
- Membership not diverse enough
- Too much involvement by the health department
- Distraction
- Myopic—focus on one area at a time
- Lack of media impact
- The achievement of events has been primarily achieved by County employees
- Lack of representation from certain groups in the community—the perception that we don't have universities and OB/Gyns
- Outdated mission
- Lack of support for all vaccinations
- Lack of a sense of urgency
- Feeling that we need to ask for permission before we can move forward
- Dwindling participation

- Perception that the coalition is San Diego County led
- Lack of availability and scheduling
- Lack of community awareness
- County affiliation has limitations

EXTERNAL FACTORS/TRENDS THAT WILL/MIGHT HAVE A POSITIVE IMPACT ON SDIC IN THE NEXT 3 YEARS

Brainstormed Perceptions:

- H1N1 increased awareness of need for flu vaccine
- Health care reform
- Further reduction in vaccine preventable diseases
- Immunization rates continuing to increase
- Reduction in vaccine shortages
- New technologies that make vaccines better
- New technologies that make communication more efficient
- Money for media
- More awareness for the need and respect for a public health structure
- Increased collaborations, including schools
- More awareness on emergency preparedness
- Economic stimulus putting a lot of money into provider-based electronic medical records
- New vaccines
- Better science regarding vaccine safety
- Immunization advertisements on TV
- Increased use of the registry
- Improvement in vaccine reimbursement for providers
- More legislation supporting vaccines
- More buy in from the provider community to send staff to the coalition

EXTERNAL FACTORS/TRENDS THAT WILL/MIGHT HAVE A NEGATIVE IMPACT ON SDIC IN THE NEXT 3 YEARS

Brainstormed Perceptions:

- Misinformation on websites
- Vaccine shortages—real and perceived
- Providers pulling out of giving immunizations
- Inadequate vaccine financing
- Jenny McCarthy
- Thimerasol
- Alternative vaccination schedules
- Budgets
- Media scare tactics
- Sensationalism
- Unstable public health funding
- Emotions vs. science
- The lack of low/no cost vaccine delivery
- People have busier jobs and less time to be in the coalition

- Economy—budget cuts
- New vaccines
- Victims of our own success
- Lack of public awareness of the benefits that exist
- Reduced fear of the negative outcomes of vaccine-preventable diseases
- Slow uptake of reimbursement for vaccines IPA (Independent Physician Association)
- Lack of trust between the public and public health
- Lack of publicity about the positive outcomes of our vaccines
- Challenges to the school entry requirement
- Overly liberal opt out exemption for required vaccines
- Limitations of 317 funding
- Limitations of public health funding
- Misperceptions about HPV
- Not a political hot button—if you want to get elected, you don't talk about vaccines
- Lack of a definite cause for conditions like autism, so vaccines get blamed
- People traveling internationally and spreading diseases from countries where they don't vaccinate
- Lack of standards and resources for vaccinations worldwide
- Lack of research on how to make vaccines differently to be more beneficial (e.g., a universal flu vaccine)
- Lack of understanding of the complexity of vaccine manufacturing and distribution
- Parents depending on herd immunity and not vaccinating their kids
- Law and Order episode showing pharmaceutical companies not being concerned with developing drugs for prevention, because it was more profitable to treat the disease
- Conspiracy theorists
- Lack of resources for physicians to give information to parents about the safety and efficacy of vaccines
- Misperception about diseases—people think they are benign

BRAINSTORMED GOALS

- Increase positive media coverage in San Diego County
- Reduce school exemptions for non-medical reasons
- Improve perceptions of vaccines
- Increase immunization coverage rates for adults by 25%
- Improve awareness of health benefits of immunizations
- Educate on vaccine safety consequences of not vaccinating, and severity of diseases
- Increase participation of community based organizations
- Create immunization advocates in the community
- Utilize local resources
- Decrease morbidity and mortality of vaccine preventable diseases
- Increase active, quantifiable membership by 100%
- Maintain 90% immunization rates for children under 5
- Increase acceptance of vaccines by health care workers
- Increase immunization rates across the life span
- Increase immunization rates in underserved areas
- Increase sustainable funding
- Implement fully a structure with a decision-making process

- Increase the use of technology and social media
- Diversify the membership
- Increase the use of the registry
- Increase the number of clinics offering shots (e.g., to toddlers, pregnant women and high risk individuals)
- Hold web-based meetings
- Improve the supply of low-cost vaccines for the underserved
- Improve education on HPV and immunizations
- Increase TDAP immunization rates by 15%
- Increase the number of parent forums
- Establish a speakers' bureau
- Broaden the disease focus
- Address emerging issues
- Be a resource for the latest and best evidence-based information
- Advocate for policy changes that promote immunizations

NEXT STEPS/FOLLOW-UP PROCESS

WHEN	WHO	WHAT
November 9, 2009	Tania Farley and Jackie Workman	Distribute the strategic planning retreat record to all SDIC members.
Within 48 hours of receipt	All	Read the retreat record.
By December 15, 2009	Procedural Guides Committee (Rachael-lead)	Review the "Internal Weaknesses/Challenges" list for possible action items.
Monthly	Rachael (lead), Mark, Tania, Everardo, Aron, Mike, Josh, Suzi	Monitor progress on the goals and objectives and revise objectives (add, amend and/or delete), as needed.
Monthly	Jackie and Tania	Prepare and distribute the strategic planning objectives grid to all SDIC members.
April 28, 2010	SDIC members	Strategic Planning Retreat for a more thorough assessment of progress on the goals and objectives. Develop core values and objectives for the next six months.

STRATEGIC PLANNING ELEMENTS

“SWOT” ANALYSIS

Assess the organization's:

- Internal **S**trengths - Internal **W**eaknesses
- External **O**pportunities - External **T**hreats

MISSION/PURPOSE STATEMENT

States **WHY** the organization exists and **WHOM** it serves

VISION STATEMENT

A vivid, descriptive image of the future—what the organization will **BECOME**

CORE VALUES

What the organization values, recognizes and rewards—strongly held beliefs that are freely chosen, publicly affirmed, and acted upon with consistency and repetition

THREE YEAR GOALS

WHAT the organization needs to accomplish (consistent with the Mission and moving the organization towards its Vision) – usually limited to 4 or 5 key areas

THREE YEAR KEY PERFORMANCE MEASURES

WHAT success will look like when the goal is achieved

SIX MONTH STRATEGIC OBJECTIVES

HOW the Goals will be addressed: By when, who is accountable to do what for each of the Goals

FOLLOW-UP PROCESS

Regular, timely monitoring of progress on the goals and objectives; includes setting new objectives every six months