

**The mission** of the National Association of County and City Health Officials (NACCHO) is to be a leader, partner, catalyst, and voice with local health departments.

## CORE VALUES

### Health Equity

Achieve social justice by eliminating conditions that lead to avoidable, systematic differences in the distribution of illness and disease.

### Participation

Promote shared interests and responsibilities and enable collective efforts to achieve common goals.

### Integrity

Ensure transparent, ethical, and accountable performance.

### Science

Support and promote ongoing evidence-based practice.

### Excellence

Realize the highest quality in what we do.

### Respect

Embrace the dignity and diversity of individuals, groups, and communities.

### Leadership

Promote, recognize, and reward creativity in action.

### Innovation

Turn ideas and problems into practical solutions.

## Lead and Support Members to Advance Population Health

### A Strengthen Local Health Department Performance

Promote foundational capabilities

Promote adoption of continuous quality improvement culture

Advance health equity through principles of social justice

Promote/establish at least one additional program area

### B Provide the National Voice for Local Health Departments

Establish advocacy priorities

Increase and sustain funding for local health departments

Improve NACCHO and local health department marketing and communications capabilities

Expand relationships and partnerships

### C Deepen Member Engagement and Expand Membership

Further diversify Board leadership

Grow and retain active membership

Grow other classes of membership

### D Continue to Strengthen NACCHO as an Organization

Expand and diversify revenue to enhance NACCHO sustainability

Foster a results-oriented culture of continuous quality improvement

Recruit and retain talented staff

Maintain full cost recovery

## METRICS

1. Include adoption of progress updates on Foundational Capabilities in Government and Public Affairs Board report
2. # of downloads for QI tools in general
3. # of new registrants for NACCHO's "Roots of Health Inequity" materials
4. Provide report on area(s) of new program growth

1. Board adoption of NACCHO's Legislative and Policy Agenda
2. # of Congressional Action Network (CAN) alerts
3. # of LHDs taking action through *Engage*
4. % of NACCHO grants sent in direct payments to LHDs
5. Quarterly updates in Public Affairs report to Board
6. # of LHDs serving on FACAs
7. # of CDC FACAs on which LHOs should sit
8. # of members and NACCHO staff serving on non-FACA bodies

1. Board diversity report
2. 10% growth in active members; June 30, 2014 base
3. 94% retention of active members; June 30, 2014 base
4. 2% growth in all other classes of membership; June 30, 2014 base

1. Total revenue (Current v Prior 12-Month Period)
2. Revenue excluding federal grants (Current v 12-Month Period)
3. Reserves (Current v 12-Month Period)
4. # of internal staff trainings, # of staff attending, # of hours of training offered
5. Benchmark NACCHO staff turnover against monthly industry standards, as developed by the Society for Human Resource Management
6. Unrecovered costs (Current v 12-Month Period)