



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



Date Completed: June 1, 2014 (Quarters 1 & 2: December 1, 2013-May 31, 2014)

Completed by: Erin Cathcart, Accreditation Coordinator

Next Report Due: September 1, 2014

<i>Goal 1</i>	<i>Objective/Strategy</i>		<i>Who is responsible?</i>	<i>Update on what's been done</i>	<i>Outcome measure(s)</i>	<i>Next steps (next 3 months)</i>
<i>Build a Strong, Accredited Regional Health Department</i>	1.1: Assure high quality, well trained public health professionals are working in collaboration with every municipality in the region	1.1.1: Conduct an assessment of staff education	Senior Management	<ul style="list-style-type: none"> • The Accreditation Coordinator, along with the Senior Management team, selected the Core Competencies for Public Health Professionals created by the Council on Linkages to adopt as the core competencies for the department during the development of the 2014-2015 Workforce Development Plan. • Each staff position was assigned to a Tier on the competencies • Managers worked with staff to complete the standard assessment for each employee 	<ul style="list-style-type: none"> • Standardized assessments on file for every employee 	
		1.1.2: Develop individual development plans	Senior Management	<ul style="list-style-type: none"> • A template for an Individual Development Plan was created by the Senior Management team as part of the development of the 2014-2015 Workforce Development Plan. • Each employee has been working with their supervisor to complete the assessment & individual development plan after the workforce development plan was introduced at the May 15, 2014 staff meeting 	<ul style="list-style-type: none"> • Standardized assessments on file for every employee 	<ul style="list-style-type: none"> • Complete and file individual development plans



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



		1.1.3: Identify cross-cutting professional development opportunities and organize at least 1 staff training per year	Senior Management	<ul style="list-style-type: none"> As part of accreditation preparation, the senior management team identified performance management as an area of need. A training was held on April 17th and 18th 2014 to be provided by the Public Health Foundation Training overlapped with NACCHO ASI grant deliverables and strategic plan strategies 1.2.1 and 1.2.2 	<ul style="list-style-type: none"> Cross-cutting professional development needs are discussed Sign-in sheet for employees Training curriculum on file 	<ul style="list-style-type: none"> Gather and file documentation to complete the outcome measures for this strategy
1.2: Develop a performance management system that ensures the regional health department is accountable for achieving its annual goals and objectives	1.2.1: Complete a performance management training with staff	Senior Management	<ul style="list-style-type: none"> See Strategy 1.1.3 above 	<ul style="list-style-type: none"> See Strategy 1.1.3 above 	<ul style="list-style-type: none"> See Strategy 1.1.3 above 	
	1.2.2: Complete a multiday intensive training for senior management	Director of Public Health	<ul style="list-style-type: none"> See strategy 1.1.3 above 	<ul style="list-style-type: none"> See Strategy 1.1.3 above 	<ul style="list-style-type: none"> See Strategy 1.1.3 above 	
	1.2.3: Complete Public Health Foundation's Turning Point Assessment for performance management	Senior Management	<ul style="list-style-type: none"> Accreditation Coordinator and Senior Management Team worked with Justeen Hyde (Institute for Community Health) to review & adapt the PHF Turning Point Assessment to fit the needs of WDPH/CMRPHA (part of NACCHO ASI deliverables) Team worked with Justeen Hyde to compile the results of the assessment into a report to 	<ul style="list-style-type: none"> Self-Assessment Worksheets Completed 	<ul style="list-style-type: none"> Senior Management staff will make the results of the assessment available to the full staff 	



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



				inform the PM plan (strategy 1.2.4)		
		1.2.4: Develop a detailed performance management plan	Senior Management	<ul style="list-style-type: none"> Performance measures were developed and submitted to the City of Worcester's budget office for inclusion in the FY15 budget. These measures were informed by the strategic plan and CHIP. Measure design was facilitated by Brynn Riley (Public Health Foundation) and Justeen Hyde (Institute for Community Health) This strategy overlaps with NACCHO ASI grant deliverables & PHAB Domain 9 Staff worked with Justeen Hyde to complete a PM plan in accordance w/ PHAB guidelines to submit to NACCHO by May 30, 2014 per ASI grant deliverables 	<ul style="list-style-type: none"> Performance management plan has all elements required for PHAB accreditation; Plan is reviewed with all staff and available electronically on department server. 	<ul style="list-style-type: none"> Work to disseminate the plan and train all staff on the contents
		1.2.5: Train all staff on performance management system plan	Senior Management	<ul style="list-style-type: none"> Management staff completed a 1 day training on the basics of PM facilitated by the PHF on April 18, 2014 (part of NACCHO ASI deliverables) Director, Deputy Director, and Accreditation Coordinator attended CDC's Public Health Improvement Training in Atlanta April 24-25, 2014 (part of NACCHO ASI deliverables) 	<p>Log in sheet for training attendance</p> <p>(Documentation is on-file w/ Accreditation Coordinator)</p>	<ul style="list-style-type: none"> Management staff will plan an in-service for all staff
	1.3: Standardize Operating Policies & Procedures	1.3.1: Each program chief will conduct an assessment of current	Program Chiefs	<ul style="list-style-type: none"> Epidemiology/Nursing: No specific progress Emergency Preparedness has identified the need for a regional 	<ul style="list-style-type: none"> Meeting minutes detailing discussion with staff 	<ul style="list-style-type: none"> Epidemiology, Nursing & Community Health will identify areas where SOPs are



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



		practices; work w/ staff to develop consensus on best practices for service areas		<p>Emergency Operations Plan and updated Emergency Dispensing Site plans</p> <ul style="list-style-type: none"> • Community Health: No specific progress • Environmental Health has identified the following areas as high priority for the development of standards operating procedures: Food Inspections, Housing Inspections, Nuisance Complaint Investigations, Camp & Pool Inspections, Hearing Procedures and Court Appearances 		needed
		1.3.2 Program chiefs will draft operating procedures based on agreed upon best practices and review the procedures with staff	Program Chiefs	<ul style="list-style-type: none"> • Environmental Health is currently drafting the following procedures: Camp inspections, pool inspections, 24/7 response protocol, housing court appearances procedure • Emergency preparedness is currently drafting an all hazards emergency operations plan and is revising emergency dispensing site plans • No specific progress for Epidemiology, Nursing, and Community Health 	<ul style="list-style-type: none"> • Draft operating procedures 	<ul style="list-style-type: none"> • Environmental Health & Emergency Preparedness will continue working in their identified procedures • Community Health & Epidemiology will begin drafting procedures after completing strategy 1.3.2
		1.3.3 Adopt final operating procedures; Ensure documentation of operating procedures is	Program Chiefs	<ul style="list-style-type: none"> • No specific progress 	<ul style="list-style-type: none"> • Written procedures reviewed and signed 	<ul style="list-style-type: none"> • TBD



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



		available to all staff electronically (shared folders on server) and in paper form (binders)				
		1.3.4 Program chiefs will conduct quarterly (minimally) checks to assure compliance with operating procedures; provide additional training as needed	Program Chiefs	<ul style="list-style-type: none"> No specific progress 	<ul style="list-style-type: none"> Completed compliance check form 	<ul style="list-style-type: none"> TBD
		1.3.5 Develop a training strategy to ensure that all new staff are appropriately informed of standard operating procedures and expectations	Program Chiefs	<ul style="list-style-type: none"> No specific progress 	<ul style="list-style-type: none"> Signature of supervisor and employee on new employee orientation form 	<ul style="list-style-type: none"> TBD
	1.4: Create an infrastructure that supports	1.4.1 Develop a written quality	Senior Management	<ul style="list-style-type: none"> The formation of a departmental Quality Council is in progress who will be responsible completing a 	<ul style="list-style-type: none"> QI plan is completed and shared w/ staff 	<ul style="list-style-type: none"> The Quality Council will work to complete the



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



	continuous quality improvement efforts in	improvement plan for the health department		QI plan informed by the PM plan, strategic plan, and CHIP		plan
1.4.2 Program chiefs will review documentation of program and service delivery efforts 2 times a year and ensure that it is happening consistently and with high quality		Program Chiefs	<ul style="list-style-type: none"> • EP/EPI/Nursing: No specific progress as there is not yet a formal process for documentation review • CH: No specific progress • EH: No specific progress 	<ul style="list-style-type: none"> • Standard worksheet/dash board that accompanies each service area is complete 	<ul style="list-style-type: none"> • TBD 	
1.4.3 Develop and implement two types of trainings on quality improvement methods: 1) a basic orientation to quality improvement methods for current staff (year 1) and new staff (on-line after the initial basic training (e.g.		Senior Management	<ul style="list-style-type: none"> • The Public Health Foundation training conducted for all staff on April 17, 2014 covered the basic concepts of QI. All staff were also provided with a Public Health Quality Improvement Encyclopedia • The Quality Council will be responsible for identifying opportunities for additional training 	<ul style="list-style-type: none"> • Training curricula on file electronically & in hard copy 	<ul style="list-style-type: none"> • Convene the Quality Council to develop a training resource list 	



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



		Online trainings available from the New York State Health Department); 2) booster trainings on quality improvement methods for all CMRPHA staff that will be provided on an annual basis and based on previous quality improvement projects.				
		1.4.4 Develop at least 2 regular internship opportunities for data synthesis and analysis to build capacity of continuous quality improvement efforts	Senior Management	<ul style="list-style-type: none"> No specific progress 	<ul style="list-style-type: none"> Internship description 	<ul style="list-style-type: none"> TBD
1.5: Implement Performance	1.5.1 Each program chief will develop	Senior Management	<ul style="list-style-type: none"> See strategy 1.2.4 above 	<ul style="list-style-type: none"> Standard worksheet detailing goals 	<ul style="list-style-type: none"> N/A 	



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



	<p>Management and Quality Improvement Systems</p>	<p>annual goals, standards, objectives, targets, and indicators and measurable outcomes for their service area in collaboration with staff in accordance with performance management plan</p>			<p>and outcomes complete</p>	
		<p>1.5.2 The goals and outcomes for each service area will be reviewed with all staff and approved by the senior management team</p>	<p>Senior Management</p>	<ul style="list-style-type: none"> Performance measures have been reviewed by senior management and were presented to staff at an all staff meeting in May 2014. 	<ul style="list-style-type: none"> Adopted performance measures 	<ul style="list-style-type: none"> Staff members responsible for submitting data for the performance management system will begin reporting July 1
		<p>1.5.3 Each program chief will be responsible for conducting a review of progress towards goals and outcomes</p>	<p>Program Chiefs</p>	<ul style="list-style-type: none"> See strategy 1.2.4 above 	<ul style="list-style-type: none"> Performance dashboard 	<ul style="list-style-type: none"> The Quality Council will work w/ Senior Management to regularly review performance measures



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



		every 6 months with their staff				
		1.5.4 Program chiefs will develop a quality improvement plan in areas where there is not sufficient progress towards goals	Program Chiefs	<ul style="list-style-type: none"> No specific progress to date 	<ul style="list-style-type: none"> QI plans complete 	<ul style="list-style-type: none"> The WDPH/CMRPHA Quality Council will work to develop a department-wide QI plan

<i>Goal 2</i>	<i>Objective/Strategy</i>		<i>Who is responsible?</i>	<i>Update on what's been done</i>	<i>Outcome measure(s)</i>	<i>Next steps (next 3 months)</i>
<i>Develop a Sustainable Regional Public Health Service Delivery Model</i>	2.1 Create a business plan that outlines projected operating costs for the CMRPHA over the next 3 years, potential source	2.1.1 Conduct a time-motion study in each public health service area	Senior Management/Accreditation Coordinator	<ul style="list-style-type: none"> Daily Activity Reports have been utilized by Environmental Health staff to collect data on activities for the past six months 2 interns have been recruited for summer 2014 to assist with data cleaning and analysis Information has been collected from almost all CMRPHA towns on permitting fees and revenue No specific progress on other service area 	<ul style="list-style-type: none"> Daily activity reports 	<ul style="list-style-type: none"> Complete DAR data analysis and draft report of results Make plans for data collection in other service areas
		2.1.2 Engage a pro bono consultant to create a business plan	Director of Public Health	No specific progress	<ul style="list-style-type: none"> Written business plan 	TBD
		2.1.3 Share the	Director of	No specific progress	<ul style="list-style-type: none"> Item included 	TBD



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



		business plan with key stakeholders	Public Health		on board of health agendas	
		2.1.4 Monitor progress toward revenue goals	Director of Public Health	<ul style="list-style-type: none"> The FY 15 Performance Management plan includes a goal to maintain current grant funding (see strategy 2.2.3) and for each service area to pursue 2 additional funding opportunities 	<ul style="list-style-type: none"> Use of performance management dashboard 	TBD
2.2 Diversify funding to achieve maximize revenue potential		2.2.1 Standardize revenue from fees & fines in CMRPHA municipalities	Director of Public Health	<ul style="list-style-type: none"> This will be approached with each municipality when the information gathered as part of the time motion study is available (see strategy 2.1.1) 	<ul style="list-style-type: none"> Standardized fee schedules for each town 	See strategy 2.1.1
		2.2.2 Work in collaboration with at least 1 academic partner to identify & secure funding for participatory research	Director of Public Health	<ul style="list-style-type: none"> WDPH/CMRPHA is currently working in collaboration on with the UMass Medical School's Prevention Research Center on a proposal to the Robert Wood Johnson Foundation for funding to complete a research study to evaluate the outcomes of the Prevention and Wellness Trust fund 	<ul style="list-style-type: none"> Grant proposals 	<ul style="list-style-type: none"> Complete and submit grant proposal Continue to seek out opportunities
		2.2.3 Maintain grant funding for existing community health programming	All CH Staff	<ul style="list-style-type: none"> The Office of Community Health has succeeded in maintaining level funding going into FY15 even with the loss of \$10,000 of funding for the tobacco program and Mass in Motion Phase 1 funds. The office has applied for Mass in Motion Phase 2 funding that if selected would become available in fall 2014. 	<ul style="list-style-type: none"> Grant proposals 	<ul style="list-style-type: none"> Prepare for Underage Drinking RFR submission & 2015 Drug Free Communities grant
	2.3 Develop at	2.3.1 Program	Program	<ul style="list-style-type: none"> See strategy 1.2.4 above 	<ul style="list-style-type: none"> Description of 	<ul style="list-style-type: none"> The program



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



	least 2 QI projects per year	chiefs will work with their staff to identify areas for improvement	Chiefs		potential projects	chiefs will work with the Quality Council & program staff to identify and prioritize potential projects
		2.3.2 CMRPHA governing board will discuss admin challenges and select 1 improvement project	Director of Public Health	<ul style="list-style-type: none"> At the April 17, 2014 CMRPHA quarterly meeting, it was requested that WDPH staff facilitate a meeting for the town BOH clerks to discuss challenges and potential solutions. A future QI project may be selected as an outcome of this meeting which was held on May 8, 2014. A discussion of this strategy is tentative placed on the July 2014 CMRPHA quarterly meeting agenda 	<ul style="list-style-type: none"> Feedback included in annual quality improvement plan 	<ul style="list-style-type: none"> Review minutes of May 8, 2014 clerk's meeting with the Quality Council to identify potential projects
	2.4 Develop an effective & efficient communications strategy w/ governing officials, BOHs & town residents	2.4.1: Develop a central website for CMRPHA; assure that at least 2 staff have capacity to post & update	Deputy Director	<ul style="list-style-type: none"> 2 additional staff members have been given administrative privileges (Megan DeNubila & Laura Overton) Staff have been working to add additional content & incorporate suggestions from CMRPHA stakeholders provided after a demo version was presented at the 1/31/14 CMRPHA quarterly meeting 	<ul style="list-style-type: none"> Complete CMRPHA website 	<ul style="list-style-type: none"> A demo version of the site will be made available to CMRPHA stakeholders for review Comments will be collected & edits made Website will launch
		2.4.2 Identify dissemination & communication strategies that are	Senior Management	<ul style="list-style-type: none"> Communications Plan is being developed for FY15 A Quarterly Newsletter has been designed and launched in March 2014 	<ul style="list-style-type: none"> Documented discussions in minutes, updated communications plan 	<ul style="list-style-type: none"> Complete the FY15 Communications Plan and disseminate the information to



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



		appropriate for different stakeholders in participating municipalities		<ul style="list-style-type: none"> Staff have continued to make regular appearances at all Board of Health meetings to relay information on ongoing programming A meeting of the CMRPHA Board of Health clerks was held in May to discuss challenges in daily operations (see strategy 2.3.2) Summer 2014 interns will be attending many community events to disseminate health information 		staff and CMRPHA municipalities
		2.4.3 Develop standards for participating municipalities about how info will be communicated to the public	Senior Management	<ul style="list-style-type: none"> An FY15 Communications Plan is being drafted that will include information on the proper communications channels or each CMRPHA municipality. Interviews with each town were conducted by an external consultant to collect this information 	<ul style="list-style-type: none"> Standard protocols as documented in the Communications Plan 	<ul style="list-style-type: none"> Listsev creation Complete FY15 Communications Plan
		2.4.4 Develop quarterly reports for BOHs & governing officials	Senior Management	<ul style="list-style-type: none"> A Quarterly Newsletter was developed and disseminated in March 2014. 	<ul style="list-style-type: none"> Filed newsletters 	<ul style="list-style-type: none"> Release July newsletter

<i>Goal 3</i>	<i>Objective/Strategy</i>		<i>Who is responsible?</i>	<i>Update on what's been done</i>	<i>Outcome measure(s)</i>	<i>Next steps (next 3 months)</i>
<i>Mobilize Community & Academic</i>	*3.1 Develop or identify a community	3.1.1 Identify key stakeholders in	Chief of Community Health	<ul style="list-style-type: none"> Community health staff have experienced significant challenges with identifying and 	<ul style="list-style-type: none"> List of stakeholders 	<ul style="list-style-type: none"> Meet with West Boylston, Leicester, Millbury



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



<i>Partnerships</i>	wellness coalition in each CMRPHA community	each municipality who are important to the promotion of public health		<p>engaging stakeholders for wellness committees. This has led to a shift of focus to school-wellness coalitions. Every town is required by law to have a school wellness group and therefore they are a natural opportunity for WDPH/CMRPHA staff to partner with individual municipalities and build relationships.</p> <ul style="list-style-type: none"> Staff have recognized the need for a town by town approach to identifying key stakeholders has been working to first identify public health champions 		& Worcester school health committees
		*3.1.2 Convene key stakeholders at least quarterly to serve as community wellness advisors or public health champions	Chief of Community Health	<ul style="list-style-type: none"> No specific progress; see strategy 3.1.1 	<ul style="list-style-type: none"> Documentation of meetings 	<ul style="list-style-type: none"> TBD
		*3.1.3 Community wellness committees or community champions disseminate public health information	Chief of Community Health	<ul style="list-style-type: none"> No specific progress; see strategy 3.1.1 	<ul style="list-style-type: none"> Documentation of dissemination 	<ul style="list-style-type: none"> TBD
	3.2 Play a	3.2.1 Develop	Director of	<ul style="list-style-type: none"> A formal agreement was signed 	<ul style="list-style-type: none"> Formal MOUs 	<ul style="list-style-type: none"> Formalize an



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



leadership role in the development of the Center for Public Health Practice	formal MOUs with @ least 2 colleges	Public Health	with Clark University in March 2014	on file	agreement with UMass Medical
	3.2.2 Provide a structured experiential learning opportunity to up to 8 students per year	Senior Management	<ul style="list-style-type: none"> WDPH had a total of 12 interns for the spring 2014 semester (2 for Healthy Markets, 1 Holy Cross SPUD intern, 1 for Health Equity, 4 UMass nursing students working on the Senior Support Team database & another group of 4 working on an assessment of mental health services in the region) WDPH will have approx. 14 interns for summer 2014 	<ul style="list-style-type: none"> Intern files-Learning Contracts on file for: 	<ul style="list-style-type: none"> Continue to try to engage other universities Bring staff together to debrief after internships are completed to evaluate the process and attempt to streamline
	3.2.3 Provide at least 3 lectures per year for each participating school on local public health matters	Senior Management	<ul style="list-style-type: none"> A Public Health Career Panel was held for Clark University students on April 11, 2014 as part of National Public Health Week 	<ul style="list-style-type: none"> Documentation of lectures 	<ul style="list-style-type: none"> TBD

<i>Goal 4</i>	<i>Objective/Strategy</i>		<i>Who is responsible?</i>	<i>Update on what's been done</i>	<i>Outcome measure(s)</i>	<i>Next steps (next 3 months)</i>
<i>Play a leadership role in the Development of Healthy Communities</i>	4.1 Oversee implementation of the Community Health Improvement	4.1.1 Convene and facilitate community meetings w/ each domain	Community Health staff	<ul style="list-style-type: none"> CHIP domain conveners met in quarter 1 A public meeting was held in February 2014 to provide an update on the progress of the CHIP 	<ul style="list-style-type: none"> Documentation of meetings 	<ul style="list-style-type: none"> Continue to meet regularly with domain conveners Hold a meeting of the domain 3 workgroup



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



	Plan (CHIP)			<ul style="list-style-type: none"> The domain workgroups have been meeting regularly except domain 3 which not met since 2013 		
		4.1.2 Create a project management infrastructure for each domain & document major roles & responsibilities for each stakeholder	Community Health staff	<ul style="list-style-type: none"> Commonwealth Medicine offered the services of a project manager for the CHIP who developed a project management framework for implementation 	<ul style="list-style-type: none"> CHIP performance management plan 	<ul style="list-style-type: none"> Implement the management structure
		4.1.3 Provide administrative oversight for each component of the CHIP including management of grants, assessment of progress, & development of corrective action plans	Community Health staff	<ul style="list-style-type: none"> Several new grants have been secured to support the CHIP (for a mental health assessment and suicide prevention work) Staff have been facilitating the completion of quarterly reports by each domain workgroup A 2013 Amendment and Annual Report was completed and released in January 2014 Data from Youth Health Survey has been compiled and is being analyzed by UMass's Prevention Research Center 	<ul style="list-style-type: none"> Regular review of project management framework 	<ul style="list-style-type: none"> Develop an action plan for the new funding Continue to facilitate quarterly reports
	4.2 Support the use of data-driven decision making to inform	4.2.1 Work in collaboration with domain conveners to assure the collection &	Chief of Epidemiology & Chief of Community Health	<ul style="list-style-type: none"> No specific progress 	<ul style="list-style-type: none"> YHS data analyzed Annual reports 	<ul style="list-style-type: none"> TBD



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



	programs, services, policies, and activities associated with the CHIP	analysis of epi data for each CHIP domain				
		4.2.2 Epi staff will meet regularly to identify data needs	Chief of Epidemiology & Chief of Community Health	<ul style="list-style-type: none"> No specific progress 	<ul style="list-style-type: none"> Documentation of meetings 	<ul style="list-style-type: none"> TBD
		4.2.3 Epi data for CHIP domains is reviewed annually by the management team	Chief of Epidemiology & Chief of Community Health	<ul style="list-style-type: none"> No specific progress 	<ul style="list-style-type: none"> Documentation of meetings 	<ul style="list-style-type: none"> TBD
	4.3 Design & implement public education campaigns that promote health & wellness in accordance with CHIP	4.3.1 review published & gray literature for evidence-based education campaigns	Community Health staff	<ul style="list-style-type: none"> A “5210” campaign is ready for launch in partnership with Harvard Pilgrim Healthcare. The campaign aims to promote 5 fruits and vegetables per day, 2 hours of physical activity, maximum 1 hour of screen time and 0 sugar sweetened drinks for children. It will utilize multiple methods of communication including television advertising. A prescription drug abuse prevention campaign was conducted in spring 2014 with a focus on educating parents about the safe disposal of prescription drugs to prevent teens from using them A perception based campaign, “I’m About this Life” is being conducted again this summer with the Youth 	<ul style="list-style-type: none"> Summaries of effective campaign strategies 	<ul style="list-style-type: none"> The 5210 campaign will be launching in July Wheels to water will include a health education and nutrition component this year Continue to implement the “I’m About this Life” campaign



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



				Connect participants		
		4.3.2 Share evidence based strategies w/ key stakeholders	Community Health staff	<ul style="list-style-type: none"> See strategy 4.3.1 	<ul style="list-style-type: none"> Documentation of meetings 	<ul style="list-style-type: none"> Continue with the implementation of ongoing education campaigns
		4.3.3 Community wellness coalitions or others will select a public education campaign based on available evidence	Community Health staff	<ul style="list-style-type: none"> WDPH/CMRPHA staff are working on the development of an annual communications plan that will include a year-long public education campaign with monthly topics 	<ul style="list-style-type: none"> Documentation of meetings 	<ul style="list-style-type: none"> Complete the communications plan Disseminate the plan
		4.3.4 Implement public education for relevant CHIP domains	Community Health staff	<ul style="list-style-type: none"> See strategy 4.3.1 	<ul style="list-style-type: none"> Evidence of implementation 	<ul style="list-style-type: none"> Continue with the implementation of the ongoing campaigns Implement the communications plan when completed
	4.4 Build the capacity of community-based providers & residents to advocate for improvements in health	4.4.1 Develop goals, objectives & indicators of success for each training	Community Health staff	<ul style="list-style-type: none"> This information has been recorded for the Scope of Pain training (strategy 4.4.2), Cultural InSight and Undoing Racism (strategy 4.4.4) 	<ul style="list-style-type: none"> Documentation of established goals, objectives, and indicators for each training 	<ul style="list-style-type: none"> TBD
		4.4.2 Identify evidence-based training to support the	Community Health staff	<ul style="list-style-type: none"> A Scope of Pain training for providers on safe opioid prescribing practices is planned for June 2014 	<ul style="list-style-type: none"> Documentation of meetings 	<ul style="list-style-type: none"> Facilitate the Scope of Pain training



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



		development/implementation of CHIP objectives				
		4.4.3 Review evidenced-based trainings w/ wellness coalitions or other key collaborating partners	Community Health staff	<ul style="list-style-type: none"> See strategy 4.4.2 	<ul style="list-style-type: none"> Documentation of meetings 	<ul style="list-style-type: none"> TBD
		4.4.4 Provide at least 2 community-based trainings per year	Community Health staff	<ul style="list-style-type: none"> A Cultural Insight training was held for WDPH staff and community partners in the CHIP Domain 1 workgroup (Worcester Food & Active Living Policy Council) in February 2014 An Undoing Racism training was held in May 2014 for community partners and facilitated by WDPH 	<ul style="list-style-type: none"> Training curriculum on file 	<ul style="list-style-type: none"> TBD
		4.4.5 Evaluate trainings to assess participant satisfaction	Community Health staff	<ul style="list-style-type: none"> A debrief meeting with the Undoing Racism participants is planned for June 2014 	<ul style="list-style-type: none"> Record and analyze evaluation data 	<ul style="list-style-type: none"> Hold debrief
	4.5 Facilitate the development of at least 1 public policy that will improve public health per year	4.5.1 Develop a clear statement of policy problems	Senior Management	<ul style="list-style-type: none"> WDPH/CMRPHA is working on a city council report on potential tobacco control policies for the City of Worcester 	<ul style="list-style-type: none"> Written reports 	<ul style="list-style-type: none"> Submit to tobacco report to Worcester City Council
		4.5.2 Investigate & identify evidence-based policies	Senior Management	<ul style="list-style-type: none"> CHIP Domain 5 had an intern complete a literature review of potential policies to increase health equity. A report was submitted to Zach Dyer (Public 	<ul style="list-style-type: none"> Descriptions of potential policies 	<ul style="list-style-type: none"> Review the results of the literature review with CHIP Domain 5 Workgroup and



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



		that may be appropriate for the local issue		Health Prevention Specialist)		other CHIP conveners. A presentation will be scheduled for Summer 2014
		*4.5.3 Work in collaboration w/ community wellness coalitions to develop policy ideas and educate stakeholders	Senior Management	<ul style="list-style-type: none"> Sample tobacco control policies have been provided by MA DPH for use by local boards of health WDPH/CMRPHA has been working to disseminate this information to Alliance communities interested in updating their tobacco legislation 	<ul style="list-style-type: none"> Documentation of meetings 	<ul style="list-style-type: none"> TBD
		4.5.4 Work in collaboration w/ legal counsel to draft policies	Senior Management	<ul style="list-style-type: none"> No specific progress 	<ul style="list-style-type: none"> Draft policies 	<ul style="list-style-type: none"> TBD
		4.5.5 Mobilize policy-makers to support policies	Senior Management	<ul style="list-style-type: none"> WDPH/CMRPHA is working to implement a region wide complete streets policy, identified in the CHIP for improving access to physical activity resources and health equity. A training on the definition of complete streets and how communities can implement such policies was held in spring 2014 for stakeholders 	<ul style="list-style-type: none"> Documentation of meetings 	<ul style="list-style-type: none"> TBD

Goal 5	Objective/Strategy		Who is responsible?	Update on what's been done	Outcome measure(s)	Next steps (next 3 months)
Assure conditions for	5.1 Assure	5.1.1 Review	EP staff	<ul style="list-style-type: none"> CMRPHA planners have obtained 	<ul style="list-style-type: none"> Documentation 	<ul style="list-style-type: none"> Complete the all



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



<i>safe & prepared communities</i>	each municipality has an up-to-date all hazards plan	all-hazards for each municipality; identify areas in need of changes & make edits		and reviewed sample all-hazards plans from accredited health departments. The planners have presented a template to WDPH staff <ul style="list-style-type: none"> • 4 meetings have been held with CMRPHA planners and WDPH staff to begin developing the plan using the template 	of meetings	hazards plan including functional annexes & appendices
		5.1.2 Review draft changes/updates w/ emergency managers in each municipality	EP staff	<ul style="list-style-type: none"> • No specific progress 	<ul style="list-style-type: none"> • Documentation of meetings 	<ul style="list-style-type: none"> • TBD
		5.1.3 Assure updated EDS plans are integrated into all hazards plans	EP staff	<ul style="list-style-type: none"> • During all-hazards plan meetings (strategy 5.1.1 above) staff have determined that CMRPHA EDS plans will be included as a functional annex of the completed all-hazards plan 	<ul style="list-style-type: none"> • Completed all-hazards plan 	<ul style="list-style-type: none"> • Review EDS plans for needed updates • Make appropriate edits & updates
		5.1.3 Hold an educational forum for persons responsible for emergency management in CMRPHA municipalities to inform them of plans	EP staff	<ul style="list-style-type: none"> • The development of an all-hazard Emergency Operations Plan is in progress. The content of the training will be outlined based on the completed plan 	<ul style="list-style-type: none"> • Documentation of training 	<ul style="list-style-type: none"> • Complete the plan • Start planning a training and developing content
	5.2 Ensure that there is a	5.2.1 Develop relationships	EP staff	<ul style="list-style-type: none"> • Colleen Bolen represents WDPH/CMRPHA at Local 	<ul style="list-style-type: none"> • Documentation of meeting 	<ul style="list-style-type: none"> • Invite to key stakeholders to



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



robust infrastructure to respond to & recover from emergencies	w/ emergency managers in each municipality		Emergency Preparedness Coordinators meetings with other key stakeholders	minutes	table top exercises (see strategy 5.1.4)
	5.2.2 Revise the strategy for 24/7 emergency response coverage by obtaining a hotline & week-long "on call" schedule	EP staff	<ul style="list-style-type: none"> Staff consistently participate in regional & state preparedness committees (regional homeland security council, LSAC, regional & state MCI committee) A hotline has been setup but a coverage plan and plan for disseminating the information to partners is needed 	<ul style="list-style-type: none"> Active hotline with evidence of distribution 	<ul style="list-style-type: none"> Finalize coverage plan and distribute the information to key stakeholders
	5.2.3 Verify that the CMRPHA hotline # is included in the all hazards plan	EP staff	<ul style="list-style-type: none"> The development of the Emergency Operations Plan in progress (see strategy 5.1.1) 	<ul style="list-style-type: none"> Completed plan 	<ul style="list-style-type: none"> Complete the plan (see strategy 5.1.1)
	5.2.4 Conduct an annual drill to test all-hazards plan	EP staff	<ul style="list-style-type: none"> No specific progress to date 	<ul style="list-style-type: none"> After Action reports 	<ul style="list-style-type: none"> Complete the All-Hazards plan Begin planning for a drill
	5.3 Improve personal preparedness of residents in each municipality	5.3.1 Conduct an annual personal preparedness campaign	EP staff	<ul style="list-style-type: none"> No specific progress to date; information for preparedness month will be included in the FY15 Public Communications Plan currently in development 	<ul style="list-style-type: none"> Documentation of campaign
5.3.2 Increase the number of		EP staff	<ul style="list-style-type: none"> No specific progress 	<ul style="list-style-type: none"> Data report 	<ul style="list-style-type: none"> TBD



Worcester Division of Public Health/Central MA Regional Public Health Alliance 2013-2017 Strategic Plan Quarterly Report



		residents w/ disabilities that are registered w/ emergency management directors by 20%				
--	--	--	--	--	--	--

Any edits to Goals, Objectives, or Strategies?

- 1) The Community Health staff suggested editing objective 3.1 to become: Develop or identify a community wellness coalition in each CMRPHA community. This change was made because staff determined that in some municipalities there are coalitions that pre-date the creation of the Alliance that would be excellent partners in advancing the mission of CMRPHA. In some cases it is more practical to join an existing coalition than to work to create a new coalition. For this reason strategy 3.1.2 has been edited to “Convene key stakeholders at least quarterly to serve as community wellness advisors or public health champions” and strategy 3.1.3 to “Community wellness committees or community champions disseminate public health information.”
- 2) Strategy 4.5.3 has been edited to read “Work in collaboration w/ community wellness coalitions to develop policy ideas and educate stakeholders.” This change was made to reflect the considerable time and energy staff have been devoting to advancing the policy ideas identified in the 2012 CHIP by trying to build political will with local Boards of Health and other elected officials.