

**Austin / Travis County Action Plan Template Kit\***

This Action Plan Template Kit will help Austin/Travis County to create a Community Health Improvement Plan (CHIP) that is focused and evidence based and that will help us stay on track. A CHIP is an action-oriented plan that outlines the priority community health issues. The CHIP is based on key findings and themes from the Community Health Assessment. The CHIP, which includes community member, partner, and stakeholder input, delineates how these priority issues will be addressed, including strategies and measures. The long-term goal is to improve the community’s health and wellness.

In addition, following this template will help hospitals and the Austin/Travis County Health and Human Services Department to achieve specific requirements related to community health improvement. Some of the sections of the template are here to assure those key requirements are included. *(See the* [*Attachment 1*](#att1) *below for a more detailed description of the specific requirements.)*

When it comes time to take action on a community’s chosen health priorities, sometimes it is a challenge to move from a broad goal to effective and strategic action. This document addresses action planning for impact. Priority issues and focus areas have already been identified. This template moves into more specificity including:

* Specific and measurable objectives
* Strategies that have a strong foundation in the evidence base
* Specific action steps with accountabilities, deadlines and resources needed
* Links to national goals and strategies

To enhance the effectiveness of our efforts, we should fully engage community leaders and community members concerned with each issue at every stage, including this planning phase. Their involvement at this stage will help to assure chosen strategies fit the target population and will leverage ongoing support of this work during implementation. (See the Guide to Work Together from [County Health Rankings and Roadmaps](http://www.countyhealthrankings.org/sites/default/files/Work%20Together%20Guide.pdf) (<http://www.countyhealthrankings.org/sites/default/files/Work%20Together%20Guide.pdf>) for more guidance on engaging partners.)

\* This is a Template Implementation Plan that was adapted from the Wisconsin CHIPP Infrastructure Project and was modified for the Austin / Travis County Community Health Improvement Process Action Plan. Source: <http://www.walhdab.org/documents/TemplateImplementationPlanv1.0.doc>

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| **How to Use this Tool** |

The Community Health Improvement priority issues and focus areas are listed below. There are many evidence based and promising practices tools and programs throughout the nation that we can include in our action plan. Page 3 of this Action Plan kit includes national plans, evidence based and promising practices, and local plans/tools. We will continue to expand on the local plans/tools to capture the existing resources, plans, programs, and initiatives already underway in our community. Page 4 includes descriptions of action planning elements. Our blank templates begin on page 5 and the sample template begins on page 7. Each Workgroup will complete its own action plan and we will merge these into the Community Health Improvement Plan.

**Austin / Travis County   
Community Health Improvement Priorities and Focus Areas**

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| HEALTH IMPROVEMENT PRIORITIES | FOCUS AREAS |
| CHRONIC DISEASE | 1. Obesity |
| BUILT ENVIRONMENT | 1. Transportation 2. Access to healthy foods |
| ACCESS TO PRIMARY CARE and MENTAL/BEHAVIORAL HEALTH | 1. Navigating the healthcare system |
| Note:  Health education/literacy was selected as a key CROSS-CUTTING STRATEGY for all 3 priorities and focus areas. | |

A few things to keep in mind:

* The plan should describe the logical sequence of events that will result in the change desired. It works like a logic model or strategy map, helping you to drill down from a broad goal to intermediate accomplishments or outcomes and then to very concrete strategies and action steps. *(See* [*Attachment 2*](#att2) *for a description of the link between the template implementation plan and a logic model.)*
* The Action Plan often becomes the annual work plan. We may wish to cut and paste it into an annual work plan document and have our teams use that to guide our work.
  + When put into use, a work plan should be a dynamic tool. Target dates may need to be adapted. Actual results may be different than anticipated.
  + Use this tool to document your progress.

(Note: Some organizations are required to track and report on their progress in their community health improvement plan. Using this tool can achieve that end. See the [Attachment 1](#att1) below for more information on those requirements.)

* Partner organizations can extract the appropriate sections of this Plan to insert into their organization’s strategic plan and/or performance management plan. Doing that will help to document their commitment to the collaboration and to track their efforts internally.

Once our plan is complete, our community will move into actual implementation where we will use this document as a foundation for monitoring, evaluation, and communicating progress to community leaders and community members. For more information on these steps, review the Implementation and Evaluation checklists in the [Wisconsin Guidebook on Improving the Health of Local Communities.](http://www.walhdab.org/NewCHIPPResources.htm)

**Helpful Resources**

As you complete this tool for your community, there are several resources that will be very helpful.

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| National Health Plans: | * [Healthy People 2020](http://www.healthypeople.gov/2020/default.aspx) (http://www.healthypeople.gov/2020) * [National Prevention Strategy](http://www.cdc.gov/Features/PreventionStrategy) (<http://www.cdc.gov/Features/PreventionStrategy>) |
| Sources for Evidence-Based Strategies: | * [The Community Guide](http://www.thecommunityguide.org/index.html) (http://www.thecommunityguide.org/index.html) * NACCHO Model Practice’s Database (<http://www.naccho.org/topics/modelpractices/database/index.cfm>) * County Health Rankings & Roadmaps (<http://www.countyhealthrankings.org/>) * County Health Rankings Choosing Effective Policies and Programs http://www.countyhealthrankings.org/sites/default/files/Choose%20Effective%20Policies%20%26%20Programs%20Guide.pdf |
| Additional Austin/Travis County Resources: | * <http://www.austintexas.gov/healthforum> * Community Health Assessment PowerPoint * Draft Community Health Assessment (posted by 8/24/12) * [Imagine Austin](http://www.imagineaustin.net/) (<http://www.imagineaustin.net/>) * [Healthy Places, Healthy People](http://www.healthyplaceshealthypeople.org) ([www.healthyplaceshealthypeople.org](http://www.healthyplaceshealthypeople.org) ) |

**Instructions**

Below are both a blank template for you to complete and a sample to help illustrate how it will be used.

Complete one template for each priority area; add sections for additional goals or objectives as needed. Adapt this tool as you see fit for your community.

The following brief description of each section will help to guide your work. (Note: Planning terms are used in many different ways. You may find other definitions of terms such as “objective” or “goal.” The list below is intended to explain how those terms are used in this document. Adapt the terms as needed to fit for your community.)

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| **Priority Area:** | Enter here the top issues your community selected as priorities to address at this time. |
| **Goal:** | Write a broad statement of what you hope to accomplish related to this priority area. |
| **Performance Measures:** | Demonstrate in this section how you will know you are making progress. State specifically what you will measure to determine whether changes have occurred. Select indicators of progress for both the short term (1-2 years) and long term (3-5 years). Specify the data source you will use for those indicators (or your plan to develop a measurement system if necessary). |
| **Objectives:** | Describe the specific measurable end-products of your intervention. Objectives should be SMART: specific, measurable, achievable, realistic, and time-framed.  [Note: When writing your objectives, consider using the [“Objectives with Focus](http://www.walhdab.org/NewCHIPPResources.htm)” tool.] |
| **Background:** | Document the type of strategy you are using. Cite any evidence-base for the strategy. (See Helpful Resources above.) Cite if the strategy is a policy change (required for public health accreditation). You may also choose to provide a link to any program sites as applicable. |
| **Activity:** | Outline the steps you will take to achieve each objective. The activities are the “how” portion of the action plan. It is best to arrange activities chronologically by start dates. Place each activity in a separate row and add as many rows as you need to the template. |
| **Timeline:** | State the projected start and end date for each activity. |
| **Resources Required:** | Include all resources needed for this action step. (Examples: funding, staff time, space needs, supplies, technology, equipment, and key partners.) |
| **Lead Person/ Organization:** | Identify by name the key person who will initiate the activity, provide direction for the work, and monitor progress. |
| **Anticipated Result:** | Describe the direct, tangible and measurable results of the activity (ex: a product or document, an agreement or policy, number of participants) |
| **Progress Notes:** | Track progress of completion of activities. Also note any unexpected outcomes, both positive and negative. |
| **Alignment:** | Show the alignment between your community’s priority area and both state and national priorities. You can cite the specific objectives listed at these sites above under Helpful Resources. |

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| **Template** |

***Austin / Travis County Health Improvement Process***

***Action Plan***

**Date Created: Date Reviewed/Updated:**

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| **PRIORITY AREA:** |
| **GOAL:** |

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| **PERFORMANCE MEASURES**  **How We Will Know We are Making a Difference** | | |
| **Short Term Indicators** | **Source** | **Frequency** |
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| **Long Term Indicators** | **Source** | **Frequency** |
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| **OBJECTIVE #1:** | | | | | |
| **BACKGROUND ON STRATEGY**  **Source:**  **Evidence Base*:***  **Policy Change (Y/N):** | | | | | |
| **ACTION PLAN** | | | | | |
| **Activity** | **Target Date** | **Resources Required** | **Lead Person/ Organization** | **Anticipated Product or Result** | **Progress Notes** |
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| **OBJECTIVE #2:** | | | | | |
| **BACKGROUND ON STRATEGY**  **Source:**  **Evidence Base:**  **Policy Change (Y/N):** | | | | | |
| **ACTION PLAN** | | | | | |
| **Activity** | **Target Date** | **Resources Required** | **Lead Person/ Organization** | **Anticipated Product or Result** | **Progress Notes** |
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| **OBJECTIVE #3:** | | | | | |
| **BACKGROUND ON STRATEGY**  **Source:**  **Evidence Base:**  **Policy Change (Y/N):** | | | | | |
| **ACTION PLAN** | | | | | |
| **Activity** | **Target Date** | **Resources Required** | **Lead Person/ Organization** | **Anticipated Product or Result** | **Progress Notes** |
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| **ALIGNMENT WITH STATE/NATIONAL PRIORITIES** | | | |
| **Obj #** | **State** | **Healthy People 2020** | **National Prevention Strategy** |
| *1* |  |  |  |
| *2* |  |  |  |
| *3* |  |  |  |

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| **DESCRIBE PLANS FOR SUSTAINING ACTION** |
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| **Example** |

***ABC County Health Improvement Process***

***Implementation Plan***

**Date Created: Date Reviewed/Updated:**

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| **PRIORITY AREA:** *Nutrition & Physical Activity* |
| **GOAL:**  *ABC County will implement policies that support residents in achieving a healthy diet and increased physical activity.* |

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| **PERFORMANCE MEASURES**  **How We Will Know We are Making a Difference** | | |
| **Short Term Indicators** | **Source** | **Frequency** |
| *By DATE, decrease the percentage of adults engaging in no physical activity from x% to y%* | *WI-BRFS* | *Annual* |
| *By DATE, decrease the percentage of adults eating less than five servings of fruits and vegetables daily from x% to y%* | *WI-BRFS* | *Annual* |
| *By DATE, increase the percentage of WIC infants ever breastfed from x% to y%* | *WI-DHS (PedNSS)* | *Annual* |
| **Long Term Indicators** | **Source** | **Frequency** |
| *By DATE, decrease the percentage of overweight adult from x% to y%* | *WI-BRFS* | *Annual* |
| *By DATE, decrease the percentage of obese adults from x% to y%* | *CHR* | *Annual* |

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| **OBJECTIVE #1:**  By DATE, increase the number of ABC County municipalities that are working towards adopting local complete street policies from # to # | | | | | | | | |
| **BACKGROUND ON STRATEGY**  **Source:** *Complete Streets Program* [*http://www.completestreets.org/*](http://www.completestreets.org/)  **Evidence Base*:*** *“Urban design and land use policies” recommended by The Guide to Community Preventive Services*  **Policy Change (Y/N):** *Yes* | | | | | | | | |
| **ACTION PLAN** | | | | | | | | |
| **Activity** | | **Target Date** | **Resources Required** | | **Lead Person/ Organization** | | **Anticipated Product or Result** | **Progress Notes** |
| Attend training on WI’s complete street legislation and assess expected impact on ABC County by discussing with Highway Dept. | | 12/31/12 | Staff time  Travel | | Amy Adams, ABC Health Department | | Increased knowledge  Written resources  Assessment of impact |  |
| Finish photovoice project, targeting the communities of X, Y, and Z | | 4/30/13 | Staff time  Volunteer time  Travel  Cameras | | Amy Adams and Physical Activity Team Volunteers | | Photo display/ presentation for each community |  |
| **Activity** | | **Target Date** | **Resources Required** | | **Lead Person/ Organization** | | **Anticipated Product or Result** | **Progress Notes** |
| Find at least 1 street/road in each community and graphically design a complete street. | | 4/30/13 | Staff time | | Amy Adams | | Graphic presentation of desired design for each community’s selected street |  |
| Conduct walkability/ bikeability checklists in those communities. | | 5/31/13 | Staff time  Volunteer time  Travel | | Amy Adams and Physical Activity Team Volunteers | | Completed assessment for each community |  |
| Create a presentation for city councils about the new state law, using photovoice and complete street pictures. | | 8/30/13 | Staff time | | Susie Smith, ABC Health Officer  Terri Thomas, ABC Hospital | | PowerPoint presentation and packet of materials |  |
| Present to city councils and invite to go on a walk audit. | | 10/31/13 | Staff time | | Susie Smith  Terri Thomas | | Presentation and walk audit completed |  |
| Follow up with city council chair after meeting | | 11/30/13 | Staff time | | Susie Smith | | Discussed next steps |  |
| Announce approved policy to the community collaboratively with the city council (if approved) | | 12/31/13 | Staff time | | Terri Thomas | | Press release  Press coverage |  |
| **OBJECTIVE #2:**  *By DATE, increase the number of schools participating in a comprehensive Farm to School Program from # to #* | | | | | | | | |
| **BACKGROUND ON STRATEGY**  **Source:**[*HealthinPractice.org: toolkits, communication tools*](http://www.healthinpractice.org/projects/farm-to-school-programs)  **Evidence Base:** *Farm to School programs indicated to be effective based on “expert opinion” in “What Works for Health”*  **Policy Change (Y/N):** *Yes* | | | | | | | | |
| **ACTION PLAN** | | | | | | | | |
| **Activity** | | **Target Date** | **Resources Required** | | **Lead Person/ Organization** | | **Anticipated Product or Result** | **Progress Notes** |
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| **OBJECTIVE #3:**  *By DATE, increase the number of early care and education providers who have adopted the Ten Steps to Breastfeeding-Friendly Child Care Centers from # to #.* | | | | | | | | |
| **BACKGROUND ON STRATEGY**  **Source:** [*10 Steps Resource Kit*](http://www.dhs.wisconsin.gov/health/physicalactivity/pdf_files/BreastfeedingFriendlyChildCareCenters.pdf)  **Evidence Base:** *Breastfeeding promotion programs indicated to be “scientifically supported” in “What Works for Health’*”  **Policy Change (Y/N):** *Yes* | | | | | | | | |
| **ACTION PLAN** | | | | | | | | |
| **Activity** | | **Target Date** | **Resources Required** | | **Lead Person/ Organization** | | **Anticipated Product or Result** | **Progress Notes** |
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| **ALIGNMENT WITH STATE/NATIONAL PRIORITIES** | | | | | | | | |
| **Obj #** | **Healthiest Wisconsin 2020** | | | **Healthy People 2020** | | **National Prevention Strategy** | | |
| *1* | *Design communities to encourage activity* | | | *Increase legislative policies for the built environment that enhance access to and availability of physical activity opportunities (PA-15)* | | *Encourage community design and development that support physical activity* | | |
| *2* | *Make healthy foods available for all*  ***Increase access to healthy foods*** *and support breastfeeding* | | |  | | *Increase access to healthy and affordable foods in communities* | | |
| *3* | *Increase access to healthy foods and* ***support breastfeeding*** | | | *Increase the proportion of infants who are breastfed (MICH-21)* | | *Support policies and programs that promote breastfeeding* | | |

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| **DESCRIBE PLANS FOR SUSTAINING ACTION** |
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| **Attachment 1:**  **Hospital & Public Health Requirements related to Implementation Planning** |

**Not-for-profit hospitals** have particular requirements related to community health improvement. In terms of an Implementation Strategy, those requirements include:

* Adopt a written Implementation Strategy to address the community health needs identified during the assessment
* Describe how the hospital will address the needs
* Adopt a budget for the provision of services that address the identified needs
* Describe any planned collaboration to address the needs
* Execute the implementation strategy

**Public health departments** seeking national accreditation need to meet the specific requirements for an implementation plan outlined in Public Health Accreditation Board (PHAB) Standard 5.2.2L. Those requirements include:

* Community health priorities, measurable objectives, improvement strategies and performance measures with measurable and time-framed targets.
  + Strategies should be evidence based or promising practices (using sources such as the National Prevention Strategy, Guide to Community Preventive Services, and Healthy People 2020)
* Policy changes needed to accomplish health objectives
* Individuals and organizations who have accepted responsibility for implementing strategies.
* Measurable health outcomes or indicators to monitor progress.
* Alignment between the community health plan and the state and national priorities (and tribal where appropriate).
* Provide a report documenting progress implementing the community health improvement plan. (See 5.2.3A)

[Note: While, state and national experts familiar with the PHAB Standards reviewed and gave input on this tool, using this template does not guarantee PHAB compliance. Only PHAB site reviewers during the accreditation review process can determine whether or not a local plan meets the PHAB requirements.]

**Sources**

*Affordable Care Act (ACA) – Title IX/Section 9007* [*http://www.gpo.gov/fdsys/pkg/PLAW-111publ148/pdf/PLAW-111publ148.pdf*](http://www.gpo.gov/fdsys/pkg/PLAW-111publ148/pdf/PLAW-111publ148.pdf)

*IRS Notice 2011-52 (7/25/11)*  <http://www.irs.gov/pub/irs-drop/n-11-52.pdf>

*Public Health Accreditation Board (PHAB)* <http://www.phaboard.org/>

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| **Attachment 2:**  **Link Between Template Implementation Plan and Logic Model** |

The template implementation plan provided here is intended to follow a typical logic model by providing a structure to move from a broad goal to intermediate accomplishments or outcomes and then to very concrete strategies and action steps. Because different models/tools use different language, this crosswalk is provided to illustrate the link between the language used in this template implementation plan and that used in a logic model.

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| Template Implementation Plan Category  Goal …………………………………………………………………..  Long Term Indicators ………………………………………..  Short Term Indicators……………………………………….  Objectives ……………………………………………………….  Anticipated Product/Results ……………………………  Resources Needed …………………………………………. | Logic Model Category  Long Term Outcome  Mid-Term Outcomes  Mid-Term Outcomes  Short-Term Outcomes  Outputs  Inputs |

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| **Acknowledgements** |

This template draws heavily on the work of the Healthy Wisconsin Leadership Institute’s *Action Plan Template*. The Healthy Wisconsin Leadership Institute is a continuing education and training resource supported jointly by the University Of Wisconsin School Of Medicine and Public Health and the Medical College of Wisconsin.

The sample implementation plan borrows from actual examples created by Polk County Health Department (WI) and Oneida County Health Department (WI).

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National Association of County and City Health Officials (NACCHO).