

UNION COUNTY COLLABORATIVE HEALTH COUNCIL

2010 ANNUAL WORK PLAN

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Vision Statement

Through planning action and advocacy, the Union County Collaborative Health Council will work together collaboratively for a safe and healthy community.

Mission Statement

The Union County Collaborative Health Council shall be comprised of a diverse and representative group of citizens who are dedicated to improving the quality of life for the citizens of Union County, who meet in open forum to identify and prioritize needs, who work to address health issues and develop effective local plans for improving behavioral health and related human needs and who work to develop strong local voices to guide health planning and services for Union County. The UCCHC shall endeavor to track and coordinate resources going into Union County for health and human services attempting to ensure that limited dollars are spent in the most effective ways possible to address local needs and to act as the collaborative agency for Union County to provide broad based advisory input and guidance to the state of New Mexico in areas of behavioral health and health and human services.

Self Assessment Summary

The Council Self Assessment Survey (CSAS) was not conducted in 2010. The SWOT analysis developed from the results of the 2009 CSAS continue to be implemented.

	Strengths	Weaknesses/Challenges
<u>Council</u>	<ul style="list-style-type: none"> • Clear vision for group • Good core membership • Good use of membership talents and skills • Get things done • Meetings well run • Good meeting preparation and planning • Good core membership 	<ul style="list-style-type: none"> • Need for more diverse membership: <ul style="list-style-type: none"> Ethnic Agriculture Faith base Elected officials
	Opportunities	Barriers/Needs
<u>Environment</u>	<ul style="list-style-type: none"> • Work with other agencies/organizations to accomplish goals <ul style="list-style-type: none"> Des Moines Schools Clayton Schools Union County DWI Union County PHO Union County General Hospital Primary Care providers 	<ul style="list-style-type: none"> • Lack of infrastructure • Inadequately staffed/supported state offices • Lack of accountability for expenditures of funds in Union County • Lack prevention providers • Lack mental health providers • Lack LADAC • Lack political will to engage difficult/controversial topics (eg. Drugs/alcohol, teen sexual activity, domestic violence)

Health Council Annual Work Plan Planning Matrix

A. Council Development

Systems/Capacity Outcomes	Health Council Objectives	Health Council Action Steps	Indicators
1. Planning: The Health Council is recognized as a community health planning and information body or hub.	1. The Union County Commission will be informed of changes to the health council structure and functioning and formal recognition through Memorandum of Understanding will be obtained as necessary.	1.1 Conduct periodic updates to County Commission re: health council functioning and activities 1.2 Visit individually with County Commissioners and City council 1.3 Draft MOU, present to Commission for input and approval. 2.1 Develop community awareness improvement strategies, based on community survey. 2.2 Implement strategies	<ul style="list-style-type: none"> • Contacts with policy makers • Requests for resource directory • Requests for Community Health Profile and Plan • Approval of MOU by County Commission • Frequency of media coverage
2. Membership: The Health Council has a stable, diverse, and representative membership.	1. Continue to meet at least quarterly to conduct provider updates. 2. Focus on health issue education	1.1 Continue open, structured meetings for the purpose of addressing health issues through assessment, planning and implementation. 1.2 Distribute health information	<ul style="list-style-type: none"> • Health Council Roster • CSAS results • Increase participation from underrepresented groups
3. Internal structures: The health council is sustained and institutionalized with effective structures and practices: <ul style="list-style-type: none"> • Regular meetings • Effective meetings • Member participation 	1. Continue non profit status and operate according to by-laws. 2. Continue regular meetings.		<ul style="list-style-type: none"> • Minutes
4. Internal processes: The health council uses productive group processes.			<ul style="list-style-type: none"> • Agendas, minutes

B. Community Assessment

Systems/Capacity Outcomes	Health Council Objectives	Health Council Action Steps	Indicators
<p>1. Community health assessment: The health council is able to assess community health strengths, needs, problems, and resources.</p>	<p>1. Update Community Health Profile and Plan as funding is available</p> <p>2. Use meetings to conduct assessment of changes in access to/availability of health-related services.</p>	<p>1.1: Current data gathered, disseminated and assessed</p> <p>2.1: Minimum of bi-monthly provider activities reports to council</p>	
<p>2. Monitoring progress: The health council is able to monitor progress in achieving outcomes:</p> <ul style="list-style-type: none"> • Improving health • Improving community systems 			<ul style="list-style-type: none"> • Process for monitoring outcomes • Process for monitoring changes in health systems
<p>3. Emerging issues: The health council has the capacity to respond to emerging issues.</p>	<p>1. Develop & implement mechanism to identify possible emerging health issues</p>	<p>1.1. Schedule presentations to health council from county programs, health providers, and environmental groups at monthly health council meetings</p> <p>1.2. Publicize health council meetings via email, letter, personal invitation and publication</p>	<ul style="list-style-type: none"> • Health Council minutes: discussions of emerging issues • Study/investigation of emerging issues including applicable data and research of evidence based practice

C. Community Action: Coordination & Leadership

Systems/Capacity Outcomes	Health Council Objectives	Health Council Action Steps	Indicators
<p>1. Networks and partnerships are built and/or enhanced.</p>	<p>1. Use health council meetings to communicate information re: health services and functioning. 2. Activities unknown</p>		<ul style="list-style-type: none"> • Shared planning projects • Maintain and enhance linkages between community entities via established contacts • Joint initiatives established or strengthened • Document at council meetings
<p>2. Community programs are jointly developed or strengthened.</p>	<p>1. Plan and implement collaborative programs including: 2. Immunizations, 3. Diabetes and obesity prevention, and 4. Teen health</p>	<p>Access providers via established relationships; invite to share program information or participate in health council</p>	<ul style="list-style-type: none"> • New programs jointly developed or implemented. • Activities related to ongoing programs • Documentation of program development & implementation • Program evaluation results
<p>3. Policies are changed and/or constituencies are built for policy changes.</p>	<p>Work with members to encourage cooperation and collaboration</p>	<p>1. School contacts 2. Agency/organization contacts</p>	<p>Number of partnerships formed Number programs implemented Identify practice changes</p>
<p>4. Funds are received or leveraged in the community.</p>			<p>Grants, projects, allocations</p>