



Communication Plan

To Help Montana State and Local Health Departments Prepare for Voluntary Public Health Accreditation

Prepared for the
Montana Learning Collaborative
and the
Montana Department of Public Health and Human Services

January 1, 2010 through June 30, 2011





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BACKGROUND:

National Public Health Accreditation Program Goal: to improve and protect the health of the public by advancing the quality and performance of all health departments in the country – state, local, territorial and tribal. Accreditation, based on the Ten Essential Public Health Standards, will drive public health departments to continuously improve the quality of the services they deliver to their communities.

DPHHS Goal: Through the Montana Learning Collaborative (MLC), to implement quality improvement processes that prepare state and local public health agencies for the 2011 launch of the national voluntary public health accreditation program. A comprehensive communication plan is required as part of the implementation strategies for the MLC mini-collaboratives, HB173 pilot projects, and the Public Health and Safety Division.

Communications Plan Objectives: To ultimately increase support for, and involvement in voluntary public health accreditation from state and local government and non-government public health stakeholders in Montana by improving the level of their understanding about the purpose and value of accreditation, and thereby helping prepare Montana for accreditation.

Audience:

- DPHHS management and staff;
- Other state government agencies with public health interests;
- Local level (county and tribal) health department managers and staff (including HB 173 grantees and MLC minicollaboratives), health boards, and elected officials; and
- Other statewide/local public health partner organizations/groups (government and non).

Key Information for Accreditation Message:

- Public health departments play a critical role in promoting and preserving the health of people in communities across the country; however, until now there has never been a system for ensuring standardization, accountability and quality.
- The National Voluntary Public Health Accreditation Program, expected to launch in 2011, will be extremely valuable to the future of public health in Montana.





- The voluntary accreditation program will be driven by the involvement of local health departments.
- DPHHS is ready to prepare Montana's public health community to make accreditation part of our contemporary public health practice.

Note: All acronyms used in this document are defined in the glossary on page 16.

Part A: EARLY PREPARATION AND MATERIALS DEVELOPMENT – Communication Plan Summary, Timeline, Targets

	Communication Plan Components	'09	'10	'10	'10	'10	'11	'11	Lead	Target
A.	-		Q1	Q2	Q3	Q4	Q5	Q6	Person	
1	Refine the key accreditation message(s) for the communication plan.	X							SM	Completed or Not Completed
2	Create a Public Health Accreditation Project logo and theme.	X								Completed or Not Completed
3	Develop a 1-2 page public health accreditation fact sheet.	X								Completed or Not Completed
4	Develop a 1-2 page Frequently Asked Questions (FAQ) sheet.	X								Completed or Not Completed
5	Establish a public health accreditation website.	X								Completed or Not Completed
6	Set up a List Serv or Blog for stakeholders to share information.	X	X							Completed or Not Completed
7	Create a Montana-specific <i>Orientation to Voluntary Public Health Accreditation in Montana</i> PowerPoint Presentation.	X								Completed or Not Completed
8	Create a list of structured discussion questions to accompany the PowerPoint.	X								Completed or Not Completed
9	Write an introductory article about accreditation for agency and stakeholder published or electronic newsletters.	X								Completed or Not Completed
10	Develop "What's In It For My Program?" – incentive examples specific to various public health program	X	X							Completed or Not Completed





	areas.						
11	For several items described above, work with resources	X	X			SM	
	from Spitfire Strategies and borrow from other states.						

A. Early Preparation and Materials Development

A1. Refine the key accreditation message(s) for the communication plan.

• Ensure that the MLC and other accreditation messengers are clear on the main message and points that will be put across to agencies and stakeholders through the communication plan.

A2. Create a Public Health Accreditation Project logo and theme.

- Use these to bring identity and recognition to the accreditation program/process.
- Be consistent about using the logo and theme in all communication venues.

A3. Develop a 1-2 page public health accreditation fact sheet.

- Include the basics about public health accreditation and its value to public health.
- Include contact information for MLC staff and encourage people to ask the contacts questions.
- Ensure that the message content is clear, and consistent.

A4. Develop a 1-2 page Frequently Asked Questions (FAQ) sheet.

- Include information that answers the following questions about accreditation:
 - ► What is it?
 - ▶ Why is it important to DPHHS and public health in Montana?
 - ► Who is responsible for the accreditation project?
 - ► What is structure of the accreditation program?
 - ► How will my state program(s) be affected?





- ► Why should I get involved?
- ► How can I get involved?

A5. Establish a public health accreditation website.

- Make the website easily accessible and publicize it at every opportunity.
- Include the website address on all publications, documents, and PowerPoints.
- Include the accreditation website address within the signature line of every MLC e-mail.
- Include links to the CDC national accreditation program, NACCHO, ASTHO and other national organizations with information on accreditation.
- Post fact sheets, FAQs, information about the HB173 grantees and MLC mini-collaboratives, and other pertinent information.

A6. Set up a List Serv or Blog for stakeholders to share information.

- Ask a stakeholder outside of DPHHS, with expertise in computer technology, to set up an Accreditation List Serv or Blog for interested parties to share information and/or interact about the accreditation purpose and process.
- Promote the list serv or blog to all current and potential stakeholders.

A7. Create a Montana-Specific PowerPoint Presentation.

- Create a 20-minute maximum *Orientation to Voluntary Public Health Accreditation in Montana* PowerPoint Presentation.
- Include the basics of the accreditation program, and the incentives and benefits to Montana at the state and local level.
- Include program specific examples and highlights of the work of the grantees.
- Update the PowerPoint as new information is generated, and for specific audiences.

A8. Create a list of structured discussion questions to accompany the PowerPoint.

- When presenting the PowerPoint, include opportunities for group discussion/interaction.
- Prepare for this in advance by creating a list of 5-8 structured questions to be used to help prompt the discussion.
- An example of a probing question follows: "What might be an advantage of having local health departments accredited in how childhood immunizations are given and tracked?"

A9. Write an introductory article about accreditation for agency and stakeholder hard-copy or electronic newsletters.

• Following the introductory article, write additional articles on a quarterly or 6-month schedule for submission to DPHHS Department or Division electronic newsletters, other agency newsletters and newsletters of major stakeholder groups.





• Obtain publication schedules and newsletter editor contact information at least 4 months in advance.

A10. Develop "What's In It For My Program?" incentive examples specific to various public health program areas.

- Create several written examples of "What's In It For My Program," to use for bureau and program level discussions with DPHHS mangers and staff.
- For example, describe what would be the specific incentive for, and the value of accreditation to such programs as Diabetes Prevention, Comprehensive Cancer Control, Immunizations, WIC, Food and Consumer Safety, Environmental and Public Health Tracking.
- Create similar examples for other state agencies with public health programs and for other stakeholders who would benefit from them. (I.e. Why would accreditation be important for DEQ's Montana Public Water Supply Program?)
- Expect that these descriptions may be the key selling points for obtaining program-level buy-in of accreditation.

A11. For several items described above, work with resources from Spitfire Strategies and borrow from other states.

• Do not reinvent the wheel if suitable resources/materials are available through Spit Fire Strategies and from other states with already proven successes. Modify these existing materials for use in Montana.

Part B: COMMUNICATION WITHIN DPHHS - Communication Plan Summary, Timeline, Targets

	Communication Plan Components	'09	'10	'10	'10	'10	'11	'11	Lead	Target
B.	_		Q1	Q2	Q3	Q4	Q5	Q6	Person	
1	Schedule a series of accreditation presentations with		X	X		X	X	X		8 per
	individual program managers and their staffs.									quarter
2	Request that DPHHS programs include accreditation		X	X		X	X			2 per
	information in newsletters or routine communication they									quarter
	have with local health departments.									
3	Request that public health accreditation becomes a		X	X	X	X	X	X		3 per
	standard agenda item at regularly scheduled DPHHS									quarter
	Division and Bureau Meetings.									
4	Request that the PHS Division Administrator provides at		X	X	X	X	X	X		1 per
	least quarterly accreditation updates to the DPHHS									quarter
	director.									_
5	Convene a meeting of DPHHS epidemiologists and		X	X			X			2 per year





	surveillance and evaluation staff to discuss the value of the voluntary accreditation.							
6	Meet with DPHHS bureau chiefs and attorneys about incorporating accreditation information into RFP, Contract, and TO language.		X	X	X			Completed or Not Completed
7	Discuss with Division, Bureau, and Program level management how to modify strategic plans for alignment with the accreditation standards.		X	X	X	X	X	Completed or Not Completed
8	Create a brief fact sheet about the purpose and status of public health accreditation for management to use at the 2011 MT Legislative Session.				X			Completed or Not Completed

B. Communication Within DPHHS

B1. Schedule a series of accreditation presentations with individual program managers and their staffs.

- Set up 1-hour meetings with program managers and their staffs to give each program a personal presentation on the accreditation process.
- Have two MLC members present the information and host a group discussion.
- Tailor the PowerPoint and discussion points to be specific to the various programs.
- Develop a short list of steps that staff could take to help promote accreditation within their programs, and ask for their commitment.
- Allow programs with just a few staff to combine within their bureaus for the presentations, but keep the groups small to allow 1:1 interactions.





- If managers/staff are resistant to find time to meet, request that the Division Administrator invites/directs them to do so.
- Inform the programs that accreditation project updates will be given at Bureau and Division meetings.

B2. Request that DPHHS programs include accreditation information in newsletters or routine communication they have with local Health Departments.

- Determine which programs routinely communicate with local county and tribal health departments through a newsletter or other electronic communication.
- Ask if articles and other information about accreditation could be included on a quarterly basis.
- Prepare these materials and tailor them for the audience to be reached.
- Determine if and when these programs might have annual or regular statewide meetings, and request to be able to provide accreditation information at these events.

B3. Request that public health accreditation becomes a standard agenda item at regularly scheduled DPHHS Division and Bureau Meetings.

- Be prepared to present information reiterating the main accreditation message at each meeting, along with at least one new update or information piece.
- Rotate who gives the presentation/update so there is more than one face associated with accreditation.
- Have PHSITF members, grantees or partner group representatives give the presentation when appropriate.

B4. Request that the PHS Division Administrator provides at least quarterly accreditation updates to the DPHHS director.

• Identify opportunities for the Director to publicly mention or advocate for accreditation and provide her with preparatory information.

B5. Convene a meeting of all DPHHS epidemiologists and surveillance and evaluation staff to discuss the value of the voluntary accreditation.

- Get their perspective of accreditation as it applies to data collection and evaluation.
- Ask for them to be an internal accreditation advocate and messenger within the various programs they serve.
- Follow-up with this group every six months.

B6. Meet with DPHHS bureau chiefs and attorneys about incorporating accreditation information into RFP, Contract, and TO language.





- Discuss ways that accreditation information could be included/incorporated into standard language for Request for Proposals (RFPs), into DPHHS Contract and Task Order (TO) boilerplate for agreements with county and tribal health departments, and into the contractors' local program work plans.
- Determine what method would work best and what steps are needed to implement it.
- Consider that since accreditation is voluntary, that some of the language may need to be flexible.
- Obtain upper management and legal department approval for this effort.
- Obtain a list of programs that enter into contracts/TOs with local health departments.
- Obtain information on the timeframes when new RFPs are released and contracts/TOs are negotiated and renewed
- Work incrementally on including the accreditation information in these documents until it becomes standardized.

B7. Discuss with Division, Bureau, and Program level management how to modify strategic plans for alignment with the accreditation standards.

- Determine when the next strategic planning sessions are scheduled at the Department, Division, Bureau, and Program levels.
- Begin discussions with management about how to ensure that the strategic plans are modified in such a way that they are in alignment with the public health accreditation standards.

B8. Create a brief fact sheet about the purpose and status of public health accreditation for management to use at the 2011 MT Legislative Session.

- Be prepared with a brief 1-page fact sheet, FAQs, and talking points about the purpose and status of voluntary public health accreditation for use at the 2011 Montana Legislative Session.
- Prior to the session, share this with DPHHS managers as well as key stakeholders who may have a presence at the session.
- Note: This fact sheet would be in addition to the other reports/presentations required regarding HB173.

Part C: COMMUNICATION TO OTHER STATE GOVERNMENT AGENCIES/HIGHER EDUCATION – Communication Plan Summary, Timeline, Targets

	Communication Plan Components	'09	'10	'10	'10	'10	'11	'11	Lead	Target
C			Q1	Q2	Q3	Q4	Q5	Q6	Person	
1	Meet with upper management at other state agencies that have a		X							4 in Q1





	stake in public health accreditation and determine what specific programs within their agencies need to be informed/involved with accreditation.							
2	Schedule and give accreditation presentations to bureau chiefs	X	X	X	X			2 per
	and program managers within these other agencies.							quarter
3	Determine the best method for communicating with them	X	X	X	X	X	X	Monthly
	routinely, and provide information and updates to management and key staff.							
4	Determine what universities, colleges, community colleges, and		X		X	X		1 per
	colleges of technology teach courses in public health, or public							quarter
	health related fields, and provide them with accreditation							
	information.							

C. Communication to Other State Government Agencies/Higher Education

- 1C. Meet with upper management at other state agencies that have a stake in public health accreditation and determine what specific programs within their agencies need to be informed/involved with accreditation.
 - Meet with upper management at other state agencies with programs that may have a stake in accreditation: [i.e. DEQ (Public Drinking Water Supply Program; CECRA, Wastewater Treatment Program); Department of Labor and Industry (Occupational Health and Safety); Department of Agriculture (Pesticide Application Review); Office of Public Instruction (Health Enhancement Programs)].
 - Come prepared with a letter of introduction/ request for collaboration from the DPHHS director and/or Division Administrator.
- 2C. Schedule and give accreditation presentations to bureau chiefs and program managers within these other agencies.
 - Inform them about the purpose and value of accreditation and discuss how to integrate their programs into the accreditation process.
 - Determine the best method for communicating with them over the months ahead newsletters, e-mails, meetings or conferences, etc.
 - Schedule routine times to provide information/updates to management and key staff.





- Promote the accreditation website and list serv/blog.
- 3C. Determine the best method for communicating with them routinely, and provide information and updates to management and key staff.
- 4C. Determine what universities, colleges, community colleges, and colleges of technology teach courses in public health or public health related fields, and provide them with accreditation information.
 - Working through the UM representative on the MT Public Health System Improvement Task Force, determine what public and private Montana universities, colleges, community colleges, and colleges of technology teach courses in public health or public health related fields (i.e. nursing, epidemiology, environmental health).
 - Obtain contact information for those programs.
 - Provide them with basic information on the voluntary accreditation program and offer to give presentations to staff and/or students.





Part D: COMMUNICATION TO STAKEHOLDER GROUPS AND PARTNERS – Communication Plan Summary, Timeline, Targets

	Communication Plan Components	'09	'10	'10	'10	'10	'11	'11	Lead	Target
D	_		Q1	Q2	Q3	Q4	Q5	Q6	Person	
1	Develop an outreach schedule for getting an MLC or PHSITF representative on the annual meeting agenda for the major stakeholders.	X								Completed or Not Completed
2	Identify American Indian stakeholder groups and determine if they have opportunities/venues for accreditation presentations, and schedule them.	X	X	X	X	X	X			2 per quarter
3	Prepare and submit articles on public health accreditation for the major stakeholder newsletters for their memberships.			X	X	X	X	X		2 per quarter
4	Encourage leaders of major stakeholder organizations to attend meetings/conferences sponsored by ASTHO, NALBO, NACCHO, or NEHA when public health accreditation is covered/emphasized.			X	X	X	X	X		2 per year
5	Ask AMPHO, MPHA, MACO and MEHA to make public health accreditation a standard agenda item at their quarterly meetings.		X	X	X	X	X	X		1 each per quarter
6	Give one of the first accreditation orientation PowerPoint presentations to the PHSITF and obtain their feedback on its content and message, and fine tune it accordingly.	X								Completed or Not Completed
7	Provide the PHSITF with regular updates on the accreditation process and work plan implementation at regular meetings, and via e-mail.		X	X	X	X	X	X		Monthly
8	Form a Speakers Bureau from interested PHSITF members to use for giving presentations about accreditation to stakeholder groups.			X	X	X	X	X		Completed or Not Completed; 1 per month





D. Communication to Stakeholder Groups and Partners

- 1D. Develop an outreach schedule for getting an MLC or PHSITF representative on the annual meeting agenda for the major stakeholders.
 - Develop the schedule for the following major stakeholders and new stakeholders as they are identified: AMPHO, MACO, MEHA, MPHA, MMA, MHA, MNA, and MCH.
 - Tailor the orientation PowerPoint presentation and discussion session to these groups.
 - Continue to identify new stakeholders, such as the Montana Rural Health Association.
- 2D. Identify American Indian stakeholders groups and determine if they have opportunities/venues for accreditation presentations, and schedule them.
 - Identify groups such as the Indian Health Service, Montana Urban Indian Clinics/Centers in Great Falls, Missoula, Helena, Butte, and Billings, Montana Tribal Leaders Group, and others for accreditation presentations.
- 3D. Prepare and submit articles on public health accreditation for the major stakeholder newsletters for their memberships.
 - Prepare and submit a twice-yearly article on public health accreditation for the newsletters produced by the major stakeholder organizations for their membership.
 - Focus the first article on the basics about accreditation and its value to Montana.
 - Focus the second article on providing updates about and reminders for the accreditation process.
 - After August 2010, share the results of the public health self assessments conducted by the HB173 grantees.
 - Have a different author for each article.
- 4D. Encourage leaders of major stakeholder organizations to attend meetings and conferences sponsored by ASTHO, NALBO, NACCHO, or NEHA when public health accreditation is emphasized.





- Encourage Montana stakeholder leaders (especially from AMPHO, MACO, and MEHA) to attend these national meetings and conferences.
- Provide those that attend with opportunities to report back to the PHSITF and/or the HB173 and MLC grantees.
- Post information on the website and to the listserv/blog about what the MT stakeholders learned at the national meetings.
- 5D. Ask AMPHO and MACO to make public health accreditation a standard agenda item at their quarterly meetings.
 - Be prepared to provide relevant information or updates for AMPHO and MACO for each of their meetings to ensure that the standing agenda item remains in place.
- 6D. Give one of the first accreditation orientation PowerPoint presentations to the PHSITF and obtain their feedback on its content and message, and fine tune it accordingly.
- 7D. Provide the PHSITF with regular updates on the accreditation process and work plan implementation at regular meetings, and via e-mail.
- 8D. Form a Speakers Bureau from interested PHSITF members to use for giving presentations about accreditation to stakeholder groups.
 - Ask PHSITF members if any of them would be interested in assisting the MLC in giving presentations.
 - Ensure that those who volunteer are comfortable with the key accreditation messages, materials, and PowerPoint.
 - Schedule them to assist with the presentations (either as a co-team, or on their own if they are comfortable).
 - Obtain feedback from them on how the presentations were received and what follow-up may be required for that stakeholder.

Part E: COMMUNICATION TO MLC MINI-COLLABORATIVES, HB 173 GRANTEES; OTHER LOCAL HEALTH DEPARTMENTS AND TRIBAL HEALTH DEPARTMENTS – Communication Plan Summary, Timeline, Targets

Е	Communication Plan Components	'09	'10 Q1	'10 Q2	'10 Q3	'10 Q4	'11 Q5	'11 Q6	Lead Person	Target
1	Provide accreditation orientation information and updates at		X	X	X	X	X	X	SM	3 times
	least quarterly at scheduled trainings, meetings, site visits,									per
	and via e-mail.									quarter
2	Provide the mini-collaboratives and grantees with a "tool kit"		X							Completed or





	they can use to promote accreditation with their local health						Not Completed
	department managers, staff, and local elected officials.						
3	Inform the Governor's Office about planned work with the	X	X				Completed or
	tribal health departments and ask for their advice and						Not Completed
	assistance in working with tribal governments.						
4	Share this communication plan as an example, and create a			X			Completed or
	template for the mini-collaboratives and grantees to use for						Not Completed
	local communication planning.						
5	Include a course on the basics of accreditation at the June			X		X	Completed or Not Completed
	2010 Montana Public Health Summer Institute.						Not Completed

- E. Communication to MLC Mini-Collaboratives, HB 173 Grantees; Other Local Health Departments and Tribal Health Departments
- E1. Provide accreditation orientation information and updates at least quarterly at scheduled trainings, meetings, site visits, and via e-mail.
 - Update the PowerPoint and other materials to keep them relevant and timely.
 - Ensure that there is time to engage in discussions and to ask and answer questions.
- E2. Provide the mini-collaboratives and grantees with a "tool kit" they can use to promote accreditation with their local health department managers, staff, and local elected officials.
 - Ensure that the tool kit messages are consistent with those used by the MLC and other stakeholders.
- E3. Inform the Governor's Office about planned work with the tribal health departments and ask for their advice and assistance in working with tribal governments.
 - Recognize the interest that the Governor's Office has with advising and monitoring agency activities/agreements/programs with tribal governments, and ensure their early involvement.





E4. Share this communication plan as an example, and create a template for grantees to use for local communication planning.

- Share this communication plan with the mini-collaboratives and grantees as an example of a plan they could put together for outreach about accreditation to stakeholders within their county (i.e. health department personnel, health board members, county commissioners, hospital director, emergency preparedness staff, school health teachers, and school nurses).
- Provide a blank template they could use to draft their specific communication plan.

E5. Include a course on the basics of accreditation at the June 2010 Montana Public Health Summer Institute.

- Bring in a national speaker to help teach the course, and ensure that it covers the relevancy of accreditation to public health in Montana.
- Promote the course to the mini-collaboratives and grantees as well as to DPHHS staff and to local and tribal health departments that are not grantees.
- Repeat the course in June 2011 or provide updates, whatever is relevant.

Part F: EVALUATION/MILESTONE MEASUREMENT – Communication Plan Summary, Timeline, Targets

F	Communication Plan Components	'09	'10	'10	'10	'10	' 11	' 11	Lead	Target
			Q1	Q2	Q3	Q4	Q5	Q6	Person	
1	Survey agency representatives and stakeholders about their	X		X		X		X		4 surveys
	knowledge and attitude about accreditation. Resurvey at six									
	month intervals to monitor changes.									
2	Set targets for the number of stakeholder groups reached		X	X	X	X	X	X		Completed or Not Completed
	and/or communication/outreach activities performed per									Not Completed
	quarter, and compare actual numbers to the target numbers.									

Activities/Details

F. Evaluation/Milestone Measurement





F1. Survey agency representatives and stakeholders about their knowledge and attitude about accreditation. Resurvey at six month intervals to monitor changes.

- Using an on-line survey instrument like Survey Monkey, promote and conduct a brief (less than 8 questions) survey of DPHHS program mangers, bureau chiefs, epidemiological staff, and other key staff, as well as the leaders of the major accreditation stakeholder organizations (AMPHO, MACO, MEHA, MPHA, MMA, MHA, MNA, MCHA, Montana Rural Health Association).
- Ascertain information about their knowledge and attitude about voluntary accreditation in Montana.
- Conduct the same survey at approximately six month intervals to monitor changes in knowledge and attitude after implementing the communication plan.
- Make adjustments to the communication plan if positive results are not obtained.
- Consider modeling some questions after those used in the survey of NACCHO members. (I.e. "I believe that having national standards for public health performance is a good idea.")

F2. Set targets for the number of stakeholder groups reached and/or communication or outreach activities performed per quarter, and compare actual numbers to the target numbers.

- Use the comparison numbers to measure milestone completion. Review the numbers every six months.
- Make adjustments if the targets are not reasonable or if positive results are not obtained.

Acronym Glossary

AMPHO — Association of Montana Public Health Officials

ASTHO — Association of State and Territorial Health Officers

CDC — Centers for Disease Control and Prevention

CECRA — Comprehensive Environmental Cleanup Responsibility Act

DEO — Department of Environmental Quality

DPHHS — Department of Public Health and Human Services

FAQ — Frequently Asked Questions

HB — House Bill





MACO — Montana Association of Counties

MCH — Maternal and Child Health

MCHA — Montana Comprehensive Health Association

MEHA — Montana Environmental Health Association

MHA — Montana Hospital Association

MLC — Montana Learning Collaborative

MMA — Montana Medical Association

MNA — Montana Nurses' Association

MPHA — Montana Public Health Association

NACCHO — National Association of City and County Health Officials

NALBO— National Association of Local Boards of Health

NEHA — National Environmental Health Association

PHAB — Public Health Accreditation Board

PHSD — Public Health and Safety Division

PHSITF — Public Health System Improvement Task Force

RFP — Request For Proposal

TO — Task Order

UM — University of Montana

WIC — Women, Infants, and Children