

COMMUNITY HEALTH IMPROVEMENT PLANNING (CHIP)

Template for Final Document

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Authors

Prepared for this Collaborative by the Kansas Health Institute.

Point of Contact

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Acknowledgements

Parts of this template were adapted from the Guide and Template for Comprehensive Health Improvement Planning, Version 2.1

Bower, Carol E. 2009. Guide and Template for Comprehensive Health Improvement Planning, Version 2.1. Hartford, CT: Connecticut Department of Public Health, Planning and Workforce Development Section. 119pp.

TITLE OF PLAN

Subtitle of Plan

Organization name

Contact information

Month and year of publication

TITLE OF PLAN

Subtitle of Plan

TABLE OF CONTENTS

3	CREDITS AND ACKNOWLEDGEMENTS
4	EXECUTIVE SUMMARY
5	PART 1: BACKGROUND INFORMATION
6	PART 2: PRIORITY AREAS
7	PRIORITY AREA I
10	PART 3: MONITORING AND EVALUATION
11	PART 4: SUMMARY AND NEXT STEPS
12	REFERENCES
13	APPENDIX I

CREDITS AND ACKNOWLEDGEMENTS

[Title of plan – same as on first page of document]
[Month and year of publication]

Prepared by: [List primary person who actually wrote the plan]

CHA-CHIP Planning Group [use your group's name]

[List the members of the group that helped to prepare the plan – names, credentials, affiliations]

Name	Name	Name
Affiliation	Affiliation	Affiliation
Name	Name	Name
Affiliation	Affiliation	Affiliation

Acknowledgements

[Use this space to thank those individuals or groups who assisted with the plan or process, but were not a member of the planning group – technical assistance, financial support, etc.]

EXECUTIVE SUMMARY

[This section is often written last, after the rest of the plan has been completed. It is a quick overview of the entire full-length plan. Arrange it in the same order as the sections of the plan. This is often the only part of the plan that gets read, so make sure to cover all the important material – especially your priorities.]

PART I: BACKGROUND INFORMATION

1. Describe the community area this CHIP pertains to and how this was determined – include maps if applicable
 - a. Geography
 - b. Basic demographics
 - c. Socioeconomic factors
 - d. Vulnerable populations

2. Describe your community's CHA-CHIP process, including
 - a. CHA-CHIP planning process and any applicable history
 - b. Individuals and organizations involved
 - c. Community vision statement
 - d. CHA process, data collection, and analysis
 - e. Description of community engagement activities
 - f. How priorities, goals, objectives, and intervention strategies were selected

3. Profile of community
 - a. Major themes from CHA – include tables and figures as applicable. May include entire CHA as appendix or prepare a combined CHA-CHIP document.
 - b. Community strengths and challenges

PART 2: PRIORITY AREAS

[List the priority areas you have chosen to focus on in your CHIP. If you are planning to apply for PHAB accreditation, one of your chosen priority areas must address the social determinants of health and health inequities. Add or delete numbers as needed on this list.]

1. [List priority area #1]
2. ...

[Copy and paste the next section to have a blank template available for each priority area you have chosen to focus on for your CHIP and enter information for each priority area separately – priority area #1, priority area #2, etc. Each priority area needs background information and rationale, goals/objectives/interventions framework, and an action plan.]

For example, your final document will have the following flow:

Priority Area 1:

- Background and rationale
- Goals and objectives framework
- Action plan

Priority Area 2:

- Background and rationale
- Goals and objectives framework
- Action plan

[LIST PRIORITY AREA I NAME]: *Background and Rationale*

What is [priority area I]?

[Write a description of the health problem you've chosen for priority area #1. Include the definition, national issues, etc.]

Why is [priority area I] a concern for [community name]?

[Describe CHA data that relates to this priority area. Include tables and figures if possible.]

What are our goals and how do they align with state and national goals?

PRIORITY AREA I: [type priority area]		
[Community name] Goals	Healthy Kansans 2020 Goals	Healthy People 2020 Goal
[type your goal related to this priority area; you will list the same goals here and in the next table.]	[type the Healthy Kansans 2020 goal that best aligns with this priority area]	[type the Healthy People 2020 goal that best aligns with this priority area]
[repeat for each goal]		

LIST PRIORITY AREA I NAME]: *Goals and Objectives Framework*

[Adjust the following table to suit your needs. Each priority area may have one or multiple goals. One goal may have one or multiple objectives; one objective may have one or multiple outcome measures and intervention strategies, etc.]

PRIORITY AREA I: [type priority area]

GOAL 1: [type goal here]	
<p>Objective 1: [type your objective here]</p> <p>Intervention strategy: [type your intervention strategy here]</p> <p>Intervention strategy: [copy the row above as many times as the number of intervention strategies you have related to this objective]</p>	<p>Outcome measures(s):</p> <ul style="list-style-type: none"> • [type the outcome measures associated with this objective here] • [...]
<p>Objective 2: [type your objective here]</p> <p>Intervention strategy: [type your intervention strategy here]</p> <p>Intervention strategy: [copy the row above as many times as the number of intervention strategies you have related to this objective]</p>	<p>Outcome measures(s):</p> <ul style="list-style-type: none"> • [type the outcome measures associated with this objective here] • [...]
GOAL 2: [type goal here]	
<p>Objective 1: [type your objective here]</p> <p>Intervention strategy: [type your intervention strategy here]</p> <p>Intervention strategy: [copy the row above as many times as the number of intervention strategies you have related to this objective]</p>	<p>Outcome measures(s):</p> <ul style="list-style-type: none"> • [type the outcome measures associated with this objective here] • [...]

[LIST PRIORITY AREA I NAME]: *Action Plans*

[Each intervention strategy will have an action plan. Copy this table as many times as the number of intervention strategies you have chosen to accomplish your goal. Insert or delete rows as needed. You may choose not to share this level of detail in the public document, but it should be a part of your CHIP. It is helpful to develop the action plan one goal at a time, but you may choose to combine the action plans for all the goals into one section of your CHIP before you finalize the report.

Action steps are individual responsibilities that are assigned to each organization that is participating in the CHIP process. *Example action step: “Write healthy vending machine policy by August 2014.”*

Process measures are a representation of whether or not the activities in the action plan were carried out. The process measure answers the question, “Are we doing what we said we were going to do?” *Example Process Measure: “Healthy vending machine policy written.”]*

GOAL:					
OBJECTIVE:					
INTERVENTION STRATEGY:					
Action Steps	Target Date	Lead Person or Organization	Resources Needed	Potential Partners	Process Measure or Progress Notes
1. [type each action step required to achieve the intervention strategy here]					
2. [copy the row above as many times as the number of action steps related to the intervention strategy]					

PART 3: MONITORING AND EVALUATION

[This section details how you will monitor and evaluate progress toward achieving your goals. You may choose not to share this level of detail in the public document, but it should be a part of your CHIP.

Copy the table below for as many goals as you have in your CHIP and insert lines to accommodate the number of outcome measures and process measures under each goal.

Outcome measures: these include the outcomes measures you wrote for your objectives; measures of change you are hoping to see in the community

Other activities you may consider to monitor and describe include: your process measures, community engagement activities, barriers and solutions, resources leveraged and donations, unanticipated outcomes, lessons learned, and/or success stories.]

PRIORITY AREA:							
GOAL:							
Outcome Measure	Baseline	Target	Target Date	Monitoring Organization or Frequency	Data Source	Results	Actions Taken Based upon Results
1. [type each outcome measure you've chosen to track]							
2. [copy the row above as many times as needed to accommodate your outcome measures]							

PART 4: SUMMARY AND NEXT STEPS

[Describe your group's planned follow-up activities and CHIP implementation monitoring and evaluation].

REFERENCES

1. [type any references in proper format]
- 2.

APPENDIX I

[Include appendix I here if applicable]