

PLAN
 Identify an opportunity and Plan for Improvement

1. Getting Started

Following a brainstorming session, the team met and determined that a Prioritization Matrix would help narrow the identified “problem” areas that were inhibiting development of a Community Health Improvement Plan (CHIP). The following areas were identified: improvement in available data, improving community engagement, and community assessment.

	Improve Avail Data	Improve Comm. Engage	Comm Asses	Row Total
Improvement in Available Data		1	1	2
Improving Community Engagement	10		5	15
Community Assessment	1	5		6

2. Assemble the Team

1. Keith Reed, Administrator, Comanche CHD
2. Johnetta Miller, Admin. Asst., CCHD
3. Brandie O’Connor, Turning Pt Reg Mgr, OSDH
4. Janette New, Health Educator, CCHD
5. Kyle Rogers, Health Educator, CCHD



3. Examine the Current Approach

The Team began with a root-cause analysis to determine factors that affected meeting participation seen on the fishbone diagram below.

4. Identify Potential Solutions

CCHD believed that community engagement could be improved by implementing the following steps into engagement efforts.

- Ensure clear and concise meeting agendas are prepared, with relevant objectives.
- Add an RSVP requirement to all meeting invitations, allowing an assessment of the level of engagement and identification of missing partners/sectors.
- Make a concerted effort to engage missing, key partners /sectors through personal contact via a phone call or face to face visit.

- Draft agendas will be sent out at least four weeks in advance providing sector partners an opportunity to provide input.
- Meeting request will have a clear, concise goal and beginning and end time.
- Each meeting will conclude with a meeting effectiveness survey.
- Meeting minutes will be taken and circulated in a timely manner.
- Adjustments will be made based on survey results and partner input.

5. Develop an Improvement Theory

If LHD demonstrates respect for partner time by: providing draft agendas in advance, offering clear and concise goals with beginning and ending meeting times, requesting RSVPs for meeting participation, and offering feedback via meeting minutes, then the number of community sectors represented and the score on the Meeting Effective Survey will be increased.

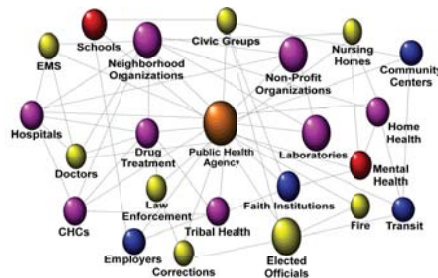
Original Aim: By December 2010, the Comanche County Health Department will improve community engagement as evidenced by: 60% of invited partners will attend meetings; an average score of 4 on the Meeting Effectiveness Survey.

DO
 Test the Theory for Improvement

6. Test the Theory

- Launch a series of meetings
- Administer meeting effectiveness survey, at each meeting.
- Distribute agenda prior to meeting.
- Identify representation from each sector.

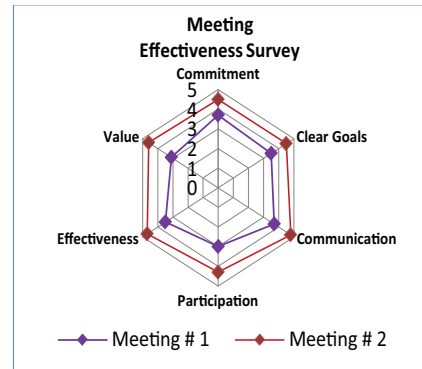
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|-------------------------|------------|
| 1. Health | 6. Youth |
| 2. School/Education | 7. Parents |
| 3. Law Enforcement/Fire | 8. Faith |
| 4. Government | 9. Civic |
| 5. Business | 10. Media |



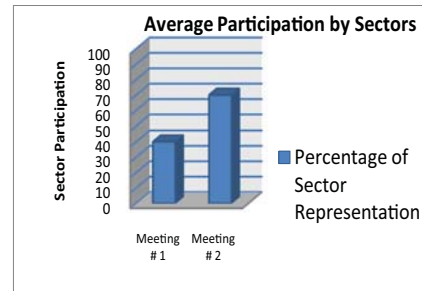
CHECK
 Use Data to Study Results of the Test

7. Check the Results

The results of the Meeting Effectiveness Survey went from an average of 3.4 to 4.6 as seen on the radar chart below.



The chart below shows an increase in sector representation from 40 to 70 percent with a goal of 60 percent.



ACT
 Standardize the Improvement and Establish Future Plans

8. Standardize the Improvement or Develop New Theory

Revised Aim Statement: By December 2010, the Comanche County Health Department will improve community engagement as evidenced by: 60% of invited sectors will attend meetings; an average score of 4 on the Meeting Effectiveness Survey.

9. Establish Future Plans

- Expand Coalition participants to include all sectors.
- Expand approach to all community engagements.