

IPLAN Standards and MAPP Crosswalk

This document is based upon original work that was developed by members of the *IPLAN Implementation Committee – Equivalent Process Sub-Committee* in 2004. Pages 2-4 were part of the original document and provide a comparison of the Illinois requirements for Illinois Project for Local Assessment of Needs (IPLAN), the *Assessment Protocol for Excellence in Public Health* (APEX-PH), which serves as the framework for IPLAN, and an approved equivalency, *Mobilizing Action Through Planning and Partnerships* (MAPP). The additional pages were developed by the Illinois Public Health Institute Center for Community Capacity Development on behalf of the Illinois Department of Public Health (IDPH). The document was reviewed by staff from the National Association of County and City Health Officials (NACCHO), IDPH IPLAN staff, and several Illinois MAPP users. The additional pages, 5-10, provide a detailed outline of the IPLAN requirements, citing sections of the Certified Local Health Department Code, and the phases and activities completed in MAPP that meet the requirements for an IPLAN submission and any additional information needed to add to a submission to meet the IPLAN requirements.

This document is intended to serve as a guide for MAPP users as they prepare their community health assessment and community health plan to submit to IDPH for certification requirements. Since MAPP has been approved as an equivalent process for IPLAN, this guide should help local health departments (LHDs) organize information and results of the MAPP process in a format that will clearly identify the required components for IPLAN. In addition, LHDs will also gain a clear understanding of any additional information that they will need to compile and submit to meet IPLAN requirements. The information in pages 5-10 is organized in the following manner:

IPLAN Category	MAPP Components	Other Items Needed
This section includes an outline of the IPLAN requirements which may serve as an outline for your MAPP IPLAN submission. This section also includes any relevant sections of the Certified Local Health Department Code (77 Ill. Adm. Code 600). This section is meant to serve as an outline and reference point to the Illinois administrative standards for IPLAN.	This section describes the assessment and planning phases and activities of MAPP that correlate to the IPLAN category. The work that correlates to the particular IPLAN category is intended to be summarized and documented as required for the MAPP IPLAN submission. This section also provides information on how and where to access guidance and resources for the phases and activities of MAPP referenced.	This section describes any additional information that is required or suggestions for supplemental information that will compliment your MAPP IPLAN submission.

If you have questions about your MAPP IPLAN submission, please feel free to contact Tom Szyrka, IPLAN Administrator, with IDPH. Tom can be reached at Tom.Szyrka@Illinois.gov or by phone at 217.782.6235. The MAPP overview web-conference and training DVDs are also a resource that can be accessed through the Illinois Public Health Institute Center for Community Capacity Development. Visit the web-site at www.iphionline.org or contact Laurie Call at LLC1185@msn.com or by phone at 217.679.2827. Additional MAPP resources, tools, samples and technical assistance is available on the NACCHO MAPP Clearinghouse at www.NACCHO.org/Project77.cfm or by calling 202.783.5550.

IPLAN Standards & MAPP as an Equivalent Planning Process

Administrative Requirements (Standards) <small>(All section references are from the Certified Local Health Department Code [77 Ill. Adm. Code 600])</small>	Process Framework Modules that Correlate to Standards	
<p>“Requirements for IPLAN or Equivalent Planning Process” (a) IPLAN or a planning process equivalent to IPLAN shall meet the following requirements. (b) Upon written request of a local health department, the Department shall approve a planning process equivalent to IPLAN if the Department determines that the proposed equivalent planning process complies with the requirements listed below (subsection (a) of Section 600.410). If the LHD is not satisfied with the Department’s response to its request made pursuant to subsection (b) of Section 600.410, it may petition the Director to reconsider. [Section 600.410(a) and Section 600.410(b)]</p>	<p>IPLAN / APEXPH¹ “Assessment Protocol for Excellence in Public Health”</p>	<p>MAPP² “Mobilizing for Action Through Planning & Partnerships”</p>
The process shall involve community participation in the identification of community health problems, priority-setting, and completion of the community health needs assessment and community health plan.	Modules: Part II - Step 1. Prepare for The APEXPH Community Process, Part II - Step 3. Form a Community Health Committee	Modules: Phases 1-5 Organize for Success / Partnership Development, Visioning, The Four Assessments, Identifying Strategic Issues, and Goals and Strategy Development
Community health indicators contained in the IPLAN Data System provided by the Department for assessment purposes or a similar, equally comprehensive data system developed by the local health department shall be utilized to structure the minimal content of the assessment. A local health department may use in its assessment such additional data available, describing the health of its population including natality, mortality, morbidity and risk factors for illness in its jurisdiction.	Modules: Part II - Step 2. Collect and Analyze Health Data, Part II - Step 4. Identify Community Health Problems, Part II – Step 7. Inventory Community Health Resources	Modules: Community Themes & Strengths* Assessment, Community Health Status Assessment, Forces of Change Assessment <i>*This assessment is intended to focus on assets; not necessarily community perceptions of health status. However, the portion on perception of ‘quality of life’ gives insight into the health of the community.</i>
The process shall result in the setting of priority health needs.	Module: Part II – Step 5. Prioritize Community Health Problems	Modules: Identify Strategic Issues, Formulate Goals & Strategies
The process shall include an analysis of priority problems that shall lead to the establishment of objectives and strategies for intervention.	Module: Part II – Step 6. Analyze Community Health Problems, Part II – Step 8. Develop a Community Health Plan	Modules: Formulate Goals & Strategies, The Action Cycle
The process shall include board of health adoption of the community health plan.	Module: Part II – Step 8. Develop a Community Health Plan, Part III Completing the Cycle	Modules: Organize for Success / Partnership Development, Visioning, The Action Cycle
The process for developing an assessment of organizational capacity shall address the internal capabilities of the local health department to conduct effective public health functions, including an assessment of operational authority, community relations, information systems and program management; or an organizational strategic plan developed within the previous five years that assesses strengths, weaknesses, opportunities and threats in the local health jurisdiction.	Module: Part I, Organizational Capacity Assessment, Part III Completing the Cycle	Module: Local Public Health System Assessment

¹ National Association of County Health Officials. APEXPH: Assessment Protocol for Excellence in Public Health. (Washington, DC: 1991)

² National Association of County & City Health Officials, MAPP: Mobilizing for Action Through Planning and Partnership. (Washington, DC: 2002) <http://mapp.naccho.org>

Detailed Outlines of APEX-PH and MAPP

APEX-PH	MAPP
<p>Part I, Organizational Capacity Assessment</p> <ul style="list-style-type: none"> Step 1. Prepare for Organizational Capacity Assessment Step 2. Score Indicators for Importance and Current Status Step 3. Identify Strengths and Weakness Step 4. Analyze and Report Strengths Step 5. Analyze Weaknesses Step 6. Rank Problems in Order of Priority Step 7. Develop and Implement Action Plans Step 8. Institutionalize the Assessment Process <p>Part II, The APEXPH Community Process</p> <ul style="list-style-type: none"> Step 1. Prepare for The APEXPH Community Process Step 2. Collect and Analyze Health Data Step 3. Form a Community Health Committee Step 4. Identify Community Health Problems Step 5. Prioritize Community Health Problems Step 6. Analyze Community Health Problems Step 7. Inventory Community Health Resources Step 8. Develop a Community Health Plan <p>Part III, Completing the Cycle</p> <ul style="list-style-type: none"> Policy Development Assurance of Implementation of Organizational and Community Health Plans Assurance of Public Health Services Monitoring and Evaluation 	<p>Phase I: Organize for Success / Partnership Development</p> <ul style="list-style-type: none"> Step 1. Determine the Necessity of Undertaking the MAPP Process Step 2. Identify and Organize Participants Step 3. Design the Planning Process Step 4. Assess Resource Needs and Secure Commitment Step 5. Conduct a Readiness Assessment Step 6. Manage the Process <p>Phase 2: Visioning</p> <ul style="list-style-type: none"> Step 1. Identify Other Visioning Efforts and Make Connection as Needed Step 2. Design the Visioning Process and Select a Facilitator Step 3. Conduct the Visioning Process Step 4. Formulate Vision and Values Statements Step 5. Keep the Vision and Values Alive Throughout the MAPP Process <p>Phase 3: The Four MAPP Assessments</p> <p>Community Themes & Strengths Assessment</p> <ul style="list-style-type: none"> Step 1. Prepare for the Community Themes & Strengths Assessment Step 2. Implement Information-gathering Activities Step 3. Compile the Results of the Community Themes & Strengths Assessment Step 4. Ensure that Community Involvement and Empowerment is Sustained <p>Local Public Health System Assessment</p> <ul style="list-style-type: none"> Step 1. Prepare for the Local Public Health System Assessment Step 2. Discuss the Essential Services and Identify Where Each Organization/Entity is Active Step 3. Discuss and Complete the Performance Measurement Instrument Step 4. Review the Results and Determine Challenges and Opportunities <p>Community Health Status Assessment</p> <ul style="list-style-type: none"> Step 1. Prepare for the Community Health Status Assessment Step 2. Collect Data and Core Indicators on CHSA Indicator List Step 3. Identify Locally-appropriate Indicators and Collect the data Step 4. Organize and Analyze the Data; Develop a Compilation of the Findings; and Disseminate the Information Step 5. Establish a System to Monitor the Indicators Over Time Step 6. Identify Challenges and Opportunities Related to Health Status

Forces of Change Assessment

- Step 1. Prepare for the Forces of Change Assessment
- Step 2. Convene a Brainstorming Session to Identify Forces of Change
- Step 3. Identify Potential Threats and Opportunities for Each Change

Phase 4: Identify Strategic Issues

- Step 1. Brainstorm Potential Strategic Issues
- Step 2. Develop and Understanding About Why an Issue is Strategic
- Step 3. Determine the Consequences of Not Addressing an Issue
- Step 4. Consolidate Overlapping or Related Issues
- Step 5. Arrange Issues into an Ordered List

Phase 5: Formulate Goals & Strategies

- Step 1. Develop Goals Related to the Vision and Strategic Issues
- Step 2. Generate Strategy Alternatives
- Step 3. Consider Barriers to Implementation
- Step 4. Consider Implementation Details
- Step 5. Select and Adopt Strategies
- Step 6. Draft the Planning Report

Phase 6: The Action Cycle

Planning for Action

- Step 1. Organize for Action
- Step 2. Develop Objectives and Establish Accountability
- Step 3. Develop Action Plans

Implementation

- Step 4. Review Action Plans for Opportunities for Coordination
- Step 5. Implement and Monitor Action Plans

Evaluation

- Step 6. Prepare for Evaluation Activities
- Step 7. Focus the Evaluation Design
- Step 8. Gather Credible Evidence and Justify Conclusion
- Step 9. Share Lessons Learned and Celebrate Successes

Guidance on using the MAPP framework, can be accessed at www.naccho.org/MAPP, or Hard copy materials, (MAPP Handbook, Field Guide and Brochure) are also available and can be ordered from: The National Association of County and City Health Officials , 1100 17th Street, 2nd Floor, Washington DC 20036
Tel: 202-783-5550, www.naccho.org

**Preparing a MAPP IPLAN for Submission to IDPH
IPLAN Outline Using MAPP**

IPLAN - IPLAN means the Illinois Project for Local Assessment of Needs, a process developed by the Department to meet the requirements set forth in Section 600.410. IPLAN is a series of planning activities conducted within the local health department jurisdiction resulting in the development of an organizational capacity assessment, a community health needs assessment and a community health plan. [Section 600.110]

MAPP – MAPP is accepted as an equivalent planning process to IPLAN. Mobilizing for Action Through Planning and Partnerships (MAPP) results in a strategic plan for improving community health and for creating and strengthening the local public health system.

IPLAN Category	MAPP Components	Other Items Needed
<p>Pre- Step: IDPH Approval for Equivalency Process <i>Upon written request of a local health department, the Department shall approve a planning process equivalent to IPLAN if the Department determines that the proposed equivalent planning process complies with the requirements of subsection (a) of Section 600.410. If the local health department is not satisfied with the Department’s response to its request made pursuant to the subsection, it may petition the Director to reconsider. [Section 600.410(b)]</i></p>		
<p>Seek approval in writing from IDPH to use MAPP as an Equivalent Planning Process for IPLAN <i>Equivalent to IPLAN means an assessment and planning process approved by the Department which meets the requirements set forth in Section 600.410. [Section 600.110]</i></p>		<p>LHD will need to submit a letter to IDPH IPLAN Administrator requesting approval to use the MAPP process as an equivalent. The letter should be submitted before beginning the MAPP process.</p>
<p>Part I: Organizational Capacity Self-Assessment <i>The local health department shall, at least once every five years, perform an organizational capacity self assessment that meets the requirements set forth in Section 600.410.</i></p>		
<p>1.1 Description of type of organizational self-assessment <i>The process for developing an assessment of organizational capacity shall address: the internal capabilities of the local health department to conduct effective public health functions, including an assessment of operational authority, community relations, information systems, and program management; or an organizational strategic plan developed within the previous five years that assesses strengths, weaknesses, opportunities and threats in the local public health jurisdiction. [Section 600.410(a)(6)(A) and Section 600.410(a)(6)(B)]</i></p>	<p>Completion of the National Public Health Performance Standards Program (NPHPS) Local Public Health System Performance Assessment or Local Governance Assessment with completion of the optional agency contribution questionnaire meets this requirement. The optional questionnaire is used to indicate the contribution of the LHD to each model standard and must be completed in addition to the assessment to meet the requirement for an organizational self-assessment. This assessment is described in the <i>MAPP User’s Handbook</i>, Phase 3—<i>The Four Assessments</i>, pages 41-55. The NPHPS instruments, user guide, glossary and additional support can be found at the following web-site: http://www.naccho.org/topics/infrastructure/MAPP.cfm</p>	<p>Additional Self-Assessment Tools that may be added to demonstrate completion of an organizational capacity self-assessment :</p> <ul style="list-style-type: none"> ▪ Organizational strategic plan that includes a SWOT analysis (assessment of strengths, weaknesses, opportunities and threats) ▪ Completion of Part I of APEXPH ▪ *Local Health Dept Self Assessment Instrument, (Operational Definition of a Functional LHD Capacity Assessment for Accreditation Preparation) <p><i>*New option. Interactive tool is located on NACCHO’s web-site at :</i> http://www.naccho.org/topics/infrastructure/accreditation.cfm</p>
<p>1.2. Documentation of Board of Health Review <i>The local health department shall provide the Department with a statement signed by an authorized representative indicating that the organizational capacity self- assessment was completed by the local health department and reviewed by the Board of Health. [Section 600.400(e)(1)]</i></p>		<p>A statement is required from the BOH that indicates the BOH has reviewed the self-assessment completed by the LHD. Typically, the self-assessment does not need to be submitted when submitting IPLAN. In the case of using MAPP, the results of the NPHPS Assessment will need to be included as these results are one of the four assessments necessary to meet MAPP guidelines. (See Section 2.3 below for more info.)</p>

IPLAN Category	MAPP Components	Other Items Needed
Part II: Community Health Needs Assessment		
<p>2.1 Statement of Purpose <i>A Community health needs assessment shall contain: a statement of purpose of the community health needs assessment that includes a description of how the assessment will be used to improve health in the community.</i> [Section 600.400(a)(2)(A)]</p>	<p>MAPP Phase I—<i>Organize for Success/Partnership Development</i>, Step 1 (page 10, <i>MAPP User's Handbook</i>) includes determining the necessity of undertaking the MAPP process. This includes reasons, benefits hoped to be gained and obstacles that may be encountered through the process. Additionally, data from a readiness assessment regarding the community's preparedness to begin the MAPP process (MAPP Phase 1, Step 5—<i>Conduct a Readiness Assessment</i>, page 14 <i>MAPP User's Handbook</i>) can provide useful information for the purpose statement. This data should be used to create a statement of purpose for conducting a community health needs assessment. Worksheets on pages 17-18 of the <i>MAPP User's Handbook</i> should be helpful.</p>	
<p>2.2 Community Health Committee <i>The process shall involve community participation in the identification of community health problems, priority-setting, and completion of the community health needs assessment and community health Plan (Part III).</i> [Section 600.410(a)(1)] <i>The assessment shall include community participation in the health needs assessment process in order to facilitate the identification of community health problems and the setting of priorities from among those health problems.</i> [Section 600.400(a)(1)(C)]. <i>Community Participation is defined as: involvement by representatives of various community interests and groups. Examples of such interests or groups are ethnic and racial groups, the medical community, mental health and social service organizations, the cooperative extension service, schools, law enforcement organizations, voluntary organizations, the clergy, the business community, economic development agencies, unions, disabled persons and senior citizens.</i>) [Section 600.110]</p> <p>a. Committee Members Names, Affiliations b. Description of Committee's Process <i>A Community health needs assessment shall contain: A description of the community participation process, a list of community groups involved in the process.</i> [Section 600.400(a)(2)(B)]</p>	<p>One of the key principles of MAPP is community participation in all phases of MAPP. MAPP Phase 1, Step 2—<i>Identify and Organize Participants</i> (page 10 <i>MAPP User's Guide</i>) includes guidance on identifying and organizing participants. Participants are selected who provide a broad range of perspectives, represent a variety of groups, sectors and activities and bring the necessary resources and enthusiasm to the table.</p> <p>See Tip Sheet 1: <i>Matrix of Organized Participation and Roles within Each Phase of MAPP</i> (pages 100-103 <i>MAPP User's Handbook</i>), Tip Sheet 2: <i>Participant Selection Worksheet</i> (page 105 <i>MAPP User's Handbook</i>) and Tip Sheet 3: <i>Guidance for Participation Identification in MAPP</i> (pages 106-108 <i>MAPP User's Handbook</i>)</p> <p>Guidelines for engaging the community and gathering feedback are listed on Tip Sheet 4—<i>Engaging the Community</i> (pages 109-110 <i>MAPP User's Handbook</i>). In the MAPP process, there are roles for a core support team, MAPP committee, subcommittees and the community at large.</p> <p>An underlying premise of MAPP is that of community engagement and participation. Compile a grid of all Committees indicating participants and their affiliations. Describe the role of each for the activities completed in MAPP Phases 1, 2, 3 and 4. Describe the processes used to engage the broader community and the community representation for each of the assessments. List the groups, organizations and individuals involved.</p>	<p>To meet IPLAN requirements, you will need to include a compiled list of all Committee and Partnership members who were engaged and involved in conducting the four MAPP assessments. The list needs to include their names and affiliations. You might consider compiling this information in a table for reporting purposes.</p> <p>In addition, you will need to describe the level of involvement, roles and processes used to engage public health system partners and the community at large in MAPP Phases 1-4. Be sure you clearly describe the level of involvement in the four MAPP assessments.</p>
<p>2.3 Description of Health Status and Health Problems</p> <p>a. Demographic and Socioeconomic Characteristics b. General Health and Access to Care c. Maternal and Child Health d. Chronic Diseases e. Infectious Diseases</p>	<p>MAPP Phase 3—<i>The Four Assessments</i> includes the following:</p> <ul style="list-style-type: none"> ▪ <u>The Community Themes and Strengths Assessment</u> (pages 34-38 <i>MAPP User's Handbook</i>). In this assessment, community thoughts, opinions and concerns are gathered to answer the following questions: “<i>What is important to our community?</i>”, “<i>How is quality of life perceived in our</i> 	<p>To meet the IPLAN requirements, ensure that the data collected includes, at a minimum, the seven data groupings of the IPLAN Data System. The IPLAN Data System can be found by following this link: http://app.idph.state.il.us/IPLANDataSystem.asp?menu=1</p>

IPLAN Category	MAPP Components	Other Items Needed
<p>f. Environmental, Occupational and Injury Control g. Sentinel Events <i>A Community health needs assessment shall contain: A description of the health status and health problems most meaningful for the community in the data groupings designated by the Department in the IPLAN Data System. [Section 600.400(a)(2)(C)] The assessment shall, at a minimum, include an analysis of data contained in the IPLAN Data System provided by the Department for assessment purposes. [Section 600.400(a)(1)(B)] Community health indicators contained in the IPLAN Data System provided by the Department for assessment purposes or a similar, equally comprehensive data system developed by the local health department shall be utilized to structure the minimal content of the assessment. A local health department may use in its assessment such additional data available, describing the health of its population including natality, mortality morbidity and risk factors for illness in its jurisdiction. [Section 600.410(a)(2)]. IPLAN Data System means a data base developed by the Department that contains the required data sets to measure community health indicators for assessment purposes. [Section 600.110]</i></p>	<p><i>community?” and “What assets do we have that can be used to improve community health?” Various approaches to gathering this information are listed in the MAPP User’s Handbook pages 39-20. Collect, compile and summarize the data. MAPP offers sample Quality of Life Questions and a Sample Community Health Survey in the Handbook on pages 119-121 and additional samples/tools on the MAPP web-site: www.naccho.org/proect77.cfm. This assessment is intended to focus more on community assets than community perceptions of health status. Asset mapping is another tool/process suggested to complete this assessment. More information can be found here: http://www.sesp.northwestern.edu/abcd/.</i></p> <ul style="list-style-type: none"> ▪ Local Public Health System Assessment** (pages 41-55 <i>MAPP User’s Handbook</i>) This is one tool accepted as meeting the requirement of the organizational capacity assessment in IPLAN (optional LHD Questionnaire must be completed). The LPHSA answers the questions, “<i>What are the components, activities, competencies, and capacities of our local public health system?</i>” and “<i>How are the 10 Essential Public Health Services being provided to our community?</i>” A <i>User’s Guide</i>, the instruments and other support materials can be found at the following web-site: http://www.cdc.gov/od/ocphp/nphpsp/. Training and technical assistance calls for use of the National Public Health Performance Standards Program (NPHPS) are available at www.nnphi.org. Determine the format/process, conduct the assessment, review data, analyze and summarize data. ▪ Community Health Status Assessment (pages 56-64 <i>MAPP User’s Guide</i>). This assessment answers the questions, “<i>How healthy are our residents?</i>” and “<i>What does the health status of our community look like?</i>” Information regarding health status, quality of life and risk factors in the community is gathered and analyzed. The core indicators are listed in 11 broad-based categories and communities are encouraged to select additional indicators beyond those listed below. Collect, organize, analyze and summarize key findings. <p><i>Who are we and what do we bring to the table?</i></p> <ol style="list-style-type: none"> 1. Demographic Characteristics 2. Socioeconomic Characteristics 3. Health Resources Availability <p><i>What are the strengths and risks in our community that contribute to health?</i></p> <ol style="list-style-type: none"> 4. Quality of Life 	<p>The seven required data groupings are:</p> <ol style="list-style-type: none"> a. Demographic and Socioeconomic Characteristics b. General Health and Access to Care c. Maternal and Child Health d. Chronic Diseases e. Infectious Diseases f. Environmental, Occupational and Injury Control g. Sentinel Events <p>All seven of the IPLAN Data groupings are represented in the MAPP categories.</p>

IPLAN Category	MAPP Components	Other Items Needed
	<p>5. Behavioral Risk Factors 6. Environmental Health Indicators</p> <p><i>What is our health status?</i></p> <p>7. Social and Mental Health 8. Maternal and Child Health 9. Death, Illness and Injury 10. Infectious Disease 11. Sentinel Events</p> <ul style="list-style-type: none"> ▪ <u>Forces of Change Assessment</u> (pages 65-71 <i>MAPP User's Handbook</i>) This assessment is aimed at identifying forces, such as trends, factors or events, that are or will be influencing the health and quality of life of the community and the work of the local public health system. Participants answer the questions, “<i>What is occurring or might occur that affects the health of our community or the local public health system?</i>” and “<i>What specific threats or opportunities are generated by these occurrences?</i>” Identify forces of change and potential threats and opportunities for each force of change. Summarize key findings. Pages 69-71 of the <i>MAPP User's Handbook</i> provides useful worksheets. <p>For your IPLAN submission, briefly describe each assessment, the process, the level of community involvement, the data collected and the analysis of the data. Be sure that the data collected and summarized for the Community Health Status Assessment meets, at a minimum, the indicators in the IPLAN Data System. See information in the “Other Items Needed Column.”</p>	
<p>2.4 Prioritization</p> <p>a. Process Used in Selecting Priorities</p> <p>b. Minimum of 3 Priorities Selected</p> <p><i>Community health needs shall be identified during the community health needs assessment process based on the analysis of data describing the health of the population and on the judgment of the community participants concerning the seriousness of the health problems and needs. Prioritization shall result in the establishment of at least three priority health needs. [Section 600.400(a)(1)(D)] A community health needs assessment shall contain: A description of the process and outcomes of setting priorities. [Section 600.400(a)(2)(D)] The process shall result in the setting of priority health needs. [Section 600.410(a)(3)]</i></p>	<p>In MAPP Phase 4-- <i>Identify Strategic Issues</i> (pages 72-28 <i>MAPP User's Handbook</i>), the findings from the MAPP Assessments are reviewed as well as the shared vision and common values (developed in MAPP Phase 2— <i>Visioning</i>). Analysis of the data from the assessments with achievement of the vision in the forefront, will lead to the emergence of cross-cutting and most prominent findings from the assessments. To brainstorm potential strategic issues, the following question is posed: “<i>Which issues suggested by the assessment findings must be addressed in order to achieve the vision?</i>” The <i>Strategic Issues Relationship Diagram</i> (page 77 of the <i>MAPP User's Handbook</i>) can be helpful here in identifying where results converge.</p> <p>Strategic issues are defined in the MAPP process as those fundamental policy choices or critical challenges that must be addressed in order for the community to achieve its vision. Strategic Issues can be differentiated from Critical Issues as Critical Issues are “important” and Strategic Issues are “important and forward thinking and seize on current</p>	<p>IPLAN requires a minimum of 3 health priorities. For IPLAN, you need to describe the process and rationale for the prioritization of the health priorities and the level of community involvement in the process.</p> <p>APEXPH defines a health problem as: “a situation or condition of people which is considered undesirable, is likely to exist in the future, and is measured as death, disease or disability.”</p> <p>While the MAPP process may surface specific health problems as strategic issues, it will also likely yield public health system issues that stretch beyond specific health problems (i.e. transportation, community connectedness, economic development) and strategic issues</p>

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	<p>opportunities”. Strategic issues are in the form of a question. <i>Strategic Issues Identification Worksheet</i>, page 78 of the <i>MAPP User’s Guide</i>, may be helpful.</p> <p>Additional analysis on the strategic issues is conducted by determining why an issue is truly strategic, determining the consequences of not addressing an issue and consolidating overlapping or related issues (Steps 3-5 <i>MAPP User’s Handbook</i>). Strategic issues are then arranged into an ordered list:</p> <ul style="list-style-type: none"> ▪ Logical: Sequence in which issues should be addressed (resolution of some issues are contingent upon resolution of others) ▪ Impact: Sequencing based on the level of importance of the consequences of each issue and the complexity. ▪ Temporal: Sequencing according to resolving issues according to a timeline, suing information such as coordination with an upcoming events. <p>For MAPP, priority not only suggests importance but also means order.</p> <p>In MAPP Phase 5—<i>Formulate Goals and Strategies</i> (pages 80-87), the questions are turned into goal statements.</p> <p>A MAPP process may produce 10-15 strategic issues. For IPLAN, a minimum of 3 prioritized health needs is required. In this portion of your equivalent IPLAN, describe the process for identifying strategic issues, prioritization process and describe the health priorities/ strategic issues selected.</p>	<p>that will be addressed by public health system partners beyond the local health department.</p> <p>For IPLAN, you may submit all strategic issues that were prioritized in the MAPP process or only those health problem priorities and system issues that the LHD will target. There may even be some strategic issues that are more system oriented that are overarching or umbrella strategic issues with more specific health problem focused issues under the umbrella that will be directly addressed by the LHD for IPLAN. Of the strategic issues identified in your MAPP process, you will need to clearly delineate at least 3 primary strategic issues that are health problems that the LHD will address in the 5 year Community Health Plan.</p> <p>Important Note: The Department recognizes ‘Access to Care’ as a health problem.</p> <p>Important Note: Those strategic issues that will be addressed by the LHD and will be included in IPLAN (minimum of 3) are further referred to in this document as <i>Primary Strategic Goals or Primary Strategic Issues</i>. (See Section 3.3 below.)</p>

Part III: Community Health Plan

The local health department shall submit the community health plan to the Department. The plan shall contain (see below): [Section 600.400(d)(5)]

<p>3.1 Statement of Purpose <i>A statement of purpose of the community health plan that includes how the plan will be used to improve the health of the community.</i> [Section 600.400(d)(5)(A)]</p>	<p>The Statement of Purpose can be derived from the vision developed in Phase 2—<i>Visioning</i> (pages 24-31 <i>MAPP User’s Handbook</i>) and the formulation of goals related to the vision and strategic issues in Phase 5—<i>Formulate Goals and Strategies</i> (pages 80-87 <i>MAPP User’s Handbook</i>).</p> <p>Describe how the creation of the Community Health Plan will be used to improve the health of the community and achieve the overall vision created in Phase 2.</p>	
<p>3.2 Community Participation a. Process Used to Complete the Community Health Plan <i>A description of the process used to develop the community health plan.</i> [Section 600.400(d)(5)(B)] <i>The local health department shall utilize community participation to assist in the development of the community health plan.</i> [Section 600.400(d)(3)]</p>	<p>Describe the processes used in Phase 5--<i>Formulate Goals and Strategies</i> (pages 80-87 <i>MAPP User’s Handbook</i>) and Phase 6--<i>The Action Cycle</i> (pages 88-97 <i>MAPP User’s Handbook</i>).</p> <p>Describe the level of community participation and the roles performed in development of the Community Health Plan. In the MAPP process, there are roles for a core support team, MAPP committee, subcommittees and the community at large. Describe the role of each for the activities completed in Phase 5 and 6.</p>	<p>For IPLAN, you will need to describe the process used and describe the level of community involvement to develop the Community Health Plan, during MAPP Phases 5 and 6.</p>

IPLAN Category	MAPP Components	Other Items Needed
	<p>Such activities in Phase 5 include: developing goals for each strategic issue, identifying strategy alternatives, identifying potential barriers, considering implementation details, selecting and adopting strategies based on the PEARL test (Step 5 of Phase 5 <i>Formulate Goals and Strategies</i>, page 84 <i>MAPP User's Handbook</i>) and drafting a planning report to be adopted by the MAPP committee.</p> <p>Activities in Phase 6, <i>The Action Cycle</i>, are designed to develop a detailed community health action plan and also address implementation and evaluation of the plan. Results of Step 2, <i>Develop Objectives and Establish Accountability</i> and Step 3, <i>Develop Action Plans</i> (pages 90-91 <i>MAPP User's Guide</i>) will be described to meet the IPLAN requirement.</p>	
<p>3.3 Priorities (Minimum of 3)</p> <p>a. Description of Priority Health Issue</p> <ul style="list-style-type: none"> - why priority was selected - importance of health problem - data priority is based on - relationship of priority to Healthy People 2010 <p><i>Healthy People 2010 refers to the National Health Promotion and Disease Prevention Objectives, US Dept of Health and Human Services, Public Health Service. Healthy People 2010 contains a national strategy for significantly improving the health of the nation during this decade and contains measurable targets for striving toward health promotion and prevention of injuries and disease. [Section 600.110] A description of each priority including the importance of the priority health need, summarized data and information on which the priority is based, the relationship of the priority to Healthy People 2010 National Health Objectives and...</i></p> <p>b. Analysis of Priority</p> <ul style="list-style-type: none"> - identification of population group(s) at risk - risk factors - direct contributing factors - indirect contributing factors <p><i>...subsequent revisions and factors influencing the level of problem (e.g. risk factors, contributing and indirect contributing factors.) [Section 600.400(d)(5)(C)] The process shall include an analysis of priority problems that shall lead to the establishment of objectives and strategies for intervention. [Section 600.410(a)(4)] Contributing factor means a scientifically established factor that directly affects the level of a risk factor. Indirect contributing factor means a community-specific factor that directly affects the level of the direct contributing factors. These factors can vary greatly from community to community. Risk factor means a scientifically established factor (determinant) that relates directly to the level of a health problem. A health problem</i></p>	<p>MAPP Strategic Issues are in the form of a question. Goal statements (what we want to achieve by addressing this strategic issue) are developed to address each strategic issue and thus the vision. This work is done in Phase 5—<i>Formulate Goals and Strategies</i> (pages 80-87 <i>MAPP User's Handbook</i>). For this section of IPLAN, use the Strategic Goal Statements for each Strategic Issue as your Priority Issues.</p> <p>Data to provide the rationale for each strategic issue selected surfaces and is discussed in MAPP Phase 4—<i>Identifying Strategic Issues</i> (pages 72-78 <i>MAPP User's Handbook</i>). This information can be summarized to meet the IPLAN requirements for “Description of Priority Health Issues (Strategic Issues)” and will need to include all the bulleted items under item (a). Strategic issues that are not a health problem may not have a relationship to HP 2010.</p> <p>Adding the <i>Strategic Issues Relationship Diagram</i> (page 77, <i>MAPP User's Handbook</i>) for each strategic issue selected would be an important addition to your MAPP IPLAN as this communicates the rationale for selection grounded in the community’s vision.</p> <p>In Phase 6--<i>The Action Cycle</i>, Step 2 is <i>Develop Objectives and Establish Accountability</i> (page 90). IPLAN requires that a minimum of at least one measurable outcome objective, at least one measurable impact objective and one proven intervention strategy be listed for each Strategic Goal (health priority area).</p> <ul style="list-style-type: none"> ▪ MAPP defines an <u>Outcome Objective</u> as the level to which a health or LPHS problem should be reduced within a specific time period. (Long-term, realistic and measurable). Outcome objectives should relate directly to strategic goals. These are statements about <i>how much</i> and <i>when</i> the program should affect the health or LPHS problem. This meets the definition in the Administrative Code. According to the Code, there needs to be a goal for measurable change within 5 years. 	<p>To meet IPLAN requirements, the following information is needed for each Primary Strategic Issue/Goal (minimum of 3) that the LHD will be addressing for the five year period of the Community Health Plan:</p> <p>a. A description of each primary strategic issue/Goal is required for IPLAN:</p> <ul style="list-style-type: none"> ▪ Why the issue was selected ▪ Importance of the health problem ▪ Data the strategic issue is based on ▪ How the findings of the MAPP assessments resulted in the strategic issue being identified ▪ Relationship to Healthy People 2010, if applicable. <p>b. Include an analysis of each strategic issue/goal, Analysis of the Strategic Issues/goals (minimum of three) need to include the following:</p> <ul style="list-style-type: none"> ▪ Population group(s) at risk ▪ Risk Factors ▪ Direct Contributing Factors ▪ Indirect Contributing Factors <p>Because there is not an activity in MAPP that focuses on identifying risk factor and direct/indirect contributing factors for health priority areas, it is strongly suggested that you use the <i>Health Problem Analysis Worksheet</i> from APEX PH to help describe and communicate the risk factors, direct and indirect contributing factors for each strategic issue</p>

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<p>may have any number of risk factors identified for it. [Section 600.110]</p> <p>c. Measurable Outcome Objective(s) <i>At least one measurable outcome objective covering a five-year time frame related to each priority health need. [Section 600.400(d)(5)(D)] Outcome Objective means a goal for the level to which a health problem should be reduced. An outcome objective is long term and measurable. [Section 600.110]</i></p> <p>d. Measurable Impact Objective (s) <i>At least one measurable impact objective related to each outcome objective. [Section 600.400(d)(5)(E)] Impact Objective means a goal for the level to which a health problem should be reduced. An impact objective is intermediate in length of time and measurable. [Section 600.110]</i></p> <p>e. Proven Intervention Strategy(ies) - community resources that will contribute to implementation - estimated funding needed for implementation - anticipated sources of funding <i>At least one proven intervention strategy to address each impact objective. The description should include a discussion of: Community Resources that will contribute to implementation, estimated funding needed for implementation, and anticipated sources of funding. [Section 600.400(d)(5)(F)] A Proven Intervention Strategy means an intervention strategy demonstrated to be effective or used as a national model. [Section 600.110]</i></p>	<ul style="list-style-type: none"> ▪ MAPP defines <u>Impact Objectives</u> as the level to which a direct determinant or risk factor is expected to be reduced within a specified time period. (Intermediate within 1-5 years, realistic and measurable.) Impact objectives relate directly to risk factors or determinants of the health of LPHS problem. These are statements about how much and when the program should affect the determinant. ▪ MAPP also includes the need for <u>Process Objectives</u>. They are defined as Action Statements aimed at affecting one or more of the contributing factors that influence the level of risk factors and determinants. (Short-term – usually one year, realistic and measurable). While this is not the same terminology as used in IPLAN, Process Objectives as defined may be considered the same as Proven Intervention Strategies if there is evidence to show that the action statements will likely be effective at affecting one or more of the contributing factors that influence the level of risk factors and determinants. <p>MAPP Action Plans are developed in Phase 6—<i>The Action Cycle</i> (pages 88-97 <i>MAPP User's Handbook</i>). The following are the components for an Action Plan for each strategic issue (health priority area):</p> <ul style="list-style-type: none"> ▪ Goal ▪ Strategy ▪ Outcome Objective(s) ▪ Impact Objective(s) ▪ Process Objective(s) 	<p>(health priority), as applicable. The worksheet can be found here: http://tinyurl.com/263rnb. If the strategic issue is not a health problem, it is highly recommended that you use a causal logic model to convey the cause and effect relationships.</p> <p>c. For each strategic issue/Goal, define at least one of each of the following:</p> <ul style="list-style-type: none"> ▪ Measurable Outcome Objective(s) ▪ Measurable Impact Objective(s) ▪ Proven Intervention Strategy(ies) <p>It is strongly suggested that you use the <i>Community Health Plan Worksheet</i> for each strategic issue/Goal (health priority). The worksheet can be found here: http://tinyurl.com/263rnb. If the strategic issue is not a health problem, it is highly recommended that you adapt the worksheet to fit the needs but still use a worksheet like this to clearly communicate your plans.</p> <p>MAPP and IPLAN have similar components for the Community Health Plans. The main difference is the language for Proven Interventions Strategies and MAPP's Process Objectives. (See the note in the previous column under Process Objectives.) For each Process Objective/Proven Intervention, you must indicate the community resources that will contribute to implementation, estimated funding needed for implementation and anticipated sources of funding.</p>
<p>Board of Health Adoption</p>		
<p>Documentation of Board of Health Adoption of Community Plan <i>The process shall include board of health adoption of the community health plan. [Section 600.410(a)(5)]</i></p>		<p>You will need to include documentation of Board of Health adoption. This can be accomplished with a letter from the BOH which is included with the equivalent IPLAN submission.</p>

This document is based upon an original comparison of the Standards, IPLAN/APEXPH, MAPP and Healthy Communities. The original document was prepared by two members of the IPLAN Implementation Committee – Equivalent Process Sub-Committee – Rick Barbieri, Laura Landrum in 2004. Revisions and additions to the original document were prepared by Laurie Call of the IPHI Center for Community Capacity Development. This document included reviews from NACCHO, IDPH and several Illinois Local Health Department MAPP users. --June 2008