Organize for Success/Partnership Development At-A-Glance

The first phase of MAPP involves two critical and interrelated activities: organizing the planning process and developing the planning partnership. The purpose of this phase is to structure a planning process that builds commitment, engages participants as active partners, uses participants' time well, and results in a plan that can be realistically implemented.

Recommended Participants and Roles:

?? <u>Core Support Team</u> — is responsible for most of the work in this phase as it prepares for the MAPP process and recruits participants.

?? <u>MAPP Committee</u> —is recruited and selected during this phase. The committee, which will guide and oversee the MAPP process, should be broadly representative of the community and the local public health system.

?? <u>Broad Community Involvement</u> — participants should be recruited as invitations are extended for the MAPP Committee. The community should also be informed of the impending MAPP process and opportunities for involvement that will occur throughout the planning process.

A Step-by-Step Overview of the Organize for Success/Partnership Development Phase:

1. Determine the necessity of undertaking the MAPP process. Identify benefits and potential barriers, as well as other community initiatives that should link to MAPP.
2. Identify and organize participants. Key organizations and individuals give the process legitimacy by offering strong initial support and providing the range of expertise necessary to develop the substance of the plan. Participants should be organized in a manner that shows how activities will be accomplished and clarifies roles and responsibilities.
3. Design the planning process by answering the questions: (a) What will the process entail? (b) How long will it take? (c) What will the results be and how will we know when we are finished? and (d) Who will perform each task?
4. Assess resource needs, such as meeting space, travel costs, report production and printing, and consultant fees. Secure commitments.
5. Conduct a readiness assessment to determine whether all of the elements are in place for a successful planning process.
6. Determine how the process will be managed by developing tools such as a workplan and guiding assumptions.

Organize for Success/Partnership Development

Introduction to the Organize for Success/Partnership Development Phase
A successful community-wide strategic planning process requires careful preparation and planning. In the first phase of MAPP, participants undertake two critical and interrelated activities: organizing the planning process and developing the planning partnership. The purpose of this phase is to structure a planning process that builds commitment, engages participants as active partners, uses participants' time well, and results in a plan that can be realistically implemented. This preparation helps participants understand the activities that will be undertaken, their responsibilities, how long it will take, and the results that are expected. Effectively laying the groundwork is key to gaining support for the process, staying on track, avoiding frustration, and arriving at a quality result. This is a phase that should not be rushed.

Preparing for the MAPP process is important for several reasons. It helps to:
- provide a rationale for how the work will be accomplished and send a signal that participants' time will be used well;
- ensure that the appropriate participants are included;
- clarify roles and responsibilities;
- set a tone of openness and sustained commitment; and
- make the process more manageable by laying the groundwork.

A community-wide strategic planning process — which should, ultimately, result in a community-owned plan — often begins with the leadership of one or more organizations. Given the assessment, policy development and assurance roles that local health departments (LHDs) play and given MAPP's focus on the local public health system, it is anticipated that many LHDs will initiate and support the MAPP process in their communities. At the same time, it is recognized that, in some communities, LHDs may lack the resources or inclination to initiate the MAPP process and will, instead, function more as a sponsor or participant while the process is led by another community stakeholder.

Several key elements should be in place before beginning the MAPP process. These include:
- understanding why a community-wide strategic plan is needed, what benefits can be expected, and what results can be achieved;
- understanding any relevant prior experience that the lead organization(s) and potential community participants have had with planning efforts;
- identifying organizations and individuals that will sponsor, support, or participate in the planning process;
- assessing the expectations or concerns of key participants about issues that must be addressed (or avoided), who should be included, or preferences for how to proceed;
- outlining a planning process that fits the needs and concerns of the community;
- gauging how long the process will take and how much time each participant will be expected to contribute;
- identifying the resources necessary for carrying out MAPP; and
- determining the availability of staff and technical support.

The Organize for Success/Partnership Development phase will help to assure that these elements are in place and that the community is ready to begin the MAPP process.

How to Conduct the Organize for Success/Partnership Development Phase

The following provides in-depth guidance on how to conduct this phase. A vignette from Chicago, IL illustrates how this phase can be conducted.

Step 1 — Determine the necessity of undertaking the MAPP Process
The first step in organizing the MAPP process involves gaining a clear understanding of why such a process is needed. This understanding will help focus the planning efforts and assist in the recruitment and sustained involvement of participants. This step is generally completed by representatives of the lead organizations that convene and initiate the effort.

The need for strategic planning may stem from a variety of sources.
- **A change in leadership** within the community, local public health agency, or local board of health can be harnessed to sponsor a planning effort.
- **A "call" for community public health planning** from the LHD or another organization may be the impetus for community-wide planning. Such a call may be issued when there is a need to: (a) position the local public health system to deal with managed care, funding cutbacks, or other influences; (b) establish community partnerships and create a greater constituency for public health; or (c) create or strengthen a local public health system centered around the Essential Public Health Services.
- **A precipitating event or external threat** may cause both the LHD and other leaders to see the need for a strategic planning process. Examples of precipitating events might be: a natural disaster; legislative initiatives; or the threat of a local hospital closure. The local media can also prompt events by raising community awareness around emerging local issues. An unexpectedly high teen pregnancy rate, drug use by school age youth, or the presence of an environmental hazard are examples of issues that may stimulate interest in community health improvement.
- **A general feeling that the "time" is right** to take a broader approach and consider the future of public health in the community may generate interest in a strategic planning process.

Several benefits can be derived from the planning effort, the clearest being the development of solutions to the problems that led to the effort. The ultimate benefit is improved health status in the community. Effective strategic planning should build systems, assure sustainable public health services, and create community cohesion.

Using the worksheet entitled Organizing the Planning Effort: Reasons, Benefits, and Sponsorship, list and refine the reasons for conducting a planning process and the expected benefits.

While reasons and expected outcomes are being identified, consider potential obstacles to the process. Try to anticipate concerns some might have about initiating a community

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strategic planning process and how those concerns might be addressed. Examples of how initial resistance to the MAPP process might be expressed include:

- ✍ "We don't have time to conduct a strategic planning process in light of the urgent problems we face."
- ✍ "Strategic planning is too complicated and will require resources we don't have."
- ✍ "Most key organizations in the community have conducted strategic planning processes within their respective entities, so what value will this approach add?"
- ✍ "Strategic plans are a waste of time and never get implemented anyway; nothing will come of it."

Such arguments may result from a stakeholder's previous participation in an unsuccessful planning effort or from an uncertainty about the benefits of community-wide strategic planning. In either case, it is essential to anticipate such resistance and develop well-conceived responses in advance.

Finally, identify other community initiatives that have been undertaken or are currently occurring in the community. This is essential to ensuring that: community resources are used wisely, new efforts build off of previous ones, and MAPP activities are not repetitive of other community initiatives. Other community initiatives, even if they are focused on different issues (i.e., transportation or education) can be linked to the MAPP process in a way that will benefit both. In addition, other community activities, such as visioning or previous health status assessments, may provide a useful starting point for MAPP activities.

Step 2 — Identify and organize participants
During this step, give careful consideration to who should be recruited and how they should be organized. Representatives of the lead organizations that initiate the effort generally conduct this step, but as new individuals are recruited, they should assist in identifying and recruiting other participants. Activities during this step include:
- ✍ identifying participants,
- ✍ selecting and recruiting participants,
- ✍ understanding and addressing stakeholder expectations, and
- ✍ organizing participation.

Two types of participants are needed for a successful MAPP process: sponsors and other stakeholders. While it is likely that your sponsors are also stakeholders, it is important to distinguish between the two types of participants.

Sponsors are key organizations and individuals that offer strong initial support. Sponsors serve the following purposes.
- ✍ They give **legitimacy** to the effort by demonstrating public support and endorsing the initiative. This is especially important from public health organizations; for example, board of health support is essential to a process that is initiated by the LHD.
- ✍ They demonstrate the **importance and feasibility** of the effort through participation and active involvement in the planning process.
- ✍ They support the process through **resource commitment** (e.g., funding, in-kind use of facilities and services, and donation of staff time).

?? They provide a **management or leadership role** in the planning process by assuming a lead role in managing the process or chairing the planning group.

Having multiple sponsors is essential. Broad sponsorship builds broad ownership and prevents the planning effort from becoming too closely identified with any single organization — something that might limit the participation and cooperation of other key organizations. Sponsors also play a key role in serving as advisors in organizing the process, as well as recruiting a broad range of participants.

Stakeholders are all persons, agencies and organizations with an investment or 'stake' in the health of the community and the local public health system. This broad definition includes persons and organizations that benefit from and/or participate in the delivery of services that promote the public's health and overall well-being.

Participants may be recruited based on a variety of considerations, including the following:

?? *They represent the local public health system* — Strengthening the local public health system requires the participation of all entities contributing to public health in a community. The Essential Public Health Services, a statement of the core processes used in public health to promote health and prevent disease, provide a meaningful framework for identifying potential MAPP participants.

?? *They represent a broad range of sectors in the community* — Because MAPP requires broad-based involvement aimed at developing a community-owned plan, representation from multiple sectors of the community is needed.

A brief discussion of these categories and the contributions various types of entities might make are included in the Tip Sheet — Guidance for Participant Identification. Review this information and develop a list of potential stakeholders. Also include criteria such as:

?? expertise or other key resources/assets that may be needed for the planning process and/ or for implementation;
?? diversity and inclusiveness, especially related to culture, ethnicity, and other potential sources of divisiveness in your community; and
?? long-term availability and interest.

Using this information, generate a candidate list (see Participant Selection Worksheet) that identifies potential organizations and individuals, areas of representation (e.g., community, business, etc.), the Essential Services they provide, and other criteria.

Once a candidate list is generated, select participants that will provide a broad range of perspectives; represent a variety of groups, sectors, and activities within the community; and bring the necessary resources and enthusiasm to the table. Give careful consideration to who is the most appropriate individual from each organization. Second-level managers — as opposed to the heads of organizations — are often the best individuals to represent larger organizations, as they may have more time to contribute and are sometimes more effective at "marketing" the process within their organizations. Also

seek to include individuals who may not be affiliated with any specific community organization.

Before recruiting participants, identify the number of participants desired and the roles that need to be filled. The number of participants is intricately tied to the manageability of the process. A common structure that balances participation and manageability is to establish a smaller support group (the Core Support Team) and a larger planning committee (the MAPP Committee). Subcommittees — which may be convened as the community proceeds through the MAPP process — can oversee specific activities. Broad community participation, via community meetings, focus groups, and other mechanisms, is also necessary to ensure that the process results in a community-driven and -owned initiative. Further information on this structure, including information about the roles to be filled in each phase of MAPP, can be found in the Matrix of Organized Participation and Roles within Each Phase of MAPP.

During this step, it is also important to consider and address stakeholder expectations. Each stakeholder's organizational philosophy, mission, and goals form the basis for stakeholder expectations — which are often unspoken undercurrents that might influence the planning process in either a positive or negative manner. If the goals and agendas of participants go unstated, they may emerge at inopportune times during the process. Thus, it is essential to identify stakeholder expectations early. The best way to bring this information to the surface is through open discussion of the MAPP process, the intended results, and the expectations for organizational participation. Continue to address stakeholder expectations as they emerge throughout the MAPP process.

Once participants are identified, give consideration to how participation will be organized. Approaches to organization vary widely and no single structure is best. The options available range from the informal (e.g., inclusive membership, voice/hand voting processes, discussion-focused agenda, and irregular meeting schedules) to the highly formal (e.g., development of a charter and established membership, meeting minutes and formal voting, and use of parliamentary rules of order). A hybrid of these approaches may strike the necessary balance (i.e., the formal use of meeting minutes and regularly scheduled meetings, combined with voice/hand voting processes, inclusive membership policies, and a discussion-focused agenda).

When organizing the planning process, consider the following:
- What are the **expectations of our participants**? Do they prefer formal or informal meetings? What level of participation can we expect from them? Will participants be willing to serve on more than one subcommittee? What kind of overlap should there be among subcommittee membership and MAPP Committee membership?
- What **time constraints do participants face**? What is their availability for meetings (bi-weekly, monthly)? Should meetings be scheduled regularly or should we identify meeting dates as we proceed through the process? How long should meetings run? How willing are participants to do "homework" between meetings? What are their expectations for the timeframe of the planning process?
- What **meeting logistics should be considered** (such as size of the geographical area, travel required for meetings, and meeting locations)?

Step 3 — Design the planning process
Designing a process involves answering the following questions:
??   What will the process entail?
??   How long will it take?
??   What results are we seeking and how will we know when we are finished?
??   Who will be responsible for carrying out specific activities?

What will the process entail? MAPP provides good guidance for a community health improvement process, but adjustments should be made to tailor the process to specific community needs and concerns. Review the guidance for the entire MAPP process and consider whether a customized approach is needed. Adjustments to MAPP might include:
✍ a simplified process for communities with little prior planning experience or limited on-site technical support or for those that want to take a learning approach;
✍ an accelerated process that fits within a shortened timeframe;
✍ a focused process that deals with a limited number of predetermined issues; or
✍ a process that links to or builds from previous or current community activities.

How long will it take? Determine the anticipated time period for the planning process. Identifying a timeframe helps to plan work activities and is also important for recruiting participants. Participants will want to know that the timeline for the initial effort is finite. When identifying the anticipated timeframe, consider the following:
✍ expectations of participants
✍ the range of issues that will be considered
✍ the number of participants and structure for participation
✍ the participants' experience with planning efforts
✍ the availability and skill of technical support
✍ the availability of existing information that can be used to inform the process

Providing a timeline should not suggest that strategic planning is a one-time effort. Indeed, to be successful, strategic planning must be ongoing and integrated into the routine activities of the participating organizations and community members. Therefore, while a timeframe may be specified, the resulting actions (the implementation and evaluation activities of the Action Cycle) should be ongoing. It is expected that a new way of thinking will result so that continual improvement is emphasized.

Because the manner in which the MAPP Assessments and other phases are implemented will affect the timeline, communities should determine the level of detail and type of community activities needed for each phase. Also consider the time commitment of participants. A shorter timeframe may require two-hour committee meetings every other week, with individual and smaller group preparation time in between. A longer timeframe may accommodate less frequent meetings. Also, consider activities that may take significant time and identify methods to address this. For example, MAPP strongly recommends beginning data collection for the Community Health Status Assessment as soon as possible. This is a time-consuming task and getting a "head start" will help to condense the time required for the four MAPP Assessments. The Example Timeline/Workplan shows how the entire process can be conducted over an 18-month

timeframe. Moving beyond a two-year timeframe for the initial effort is not recommended as momentum may be lost and participation may dwindle.

What results are we seeking and how will we know when we are finished? Results of a successful planning process include progress toward an effective local public health system, a sustainable community planning partnership, and, ultimately, improved community health status. Specifying intermediate results establishes milestones, keeps the project on track, and helps participants to assess progress and know what to expect. Identify products that will be developed throughout the process, such as vision and values statements, lists of challenges and opportunities, survey or focus group reports, and a community plan. These products offer valuable, tangible evidence that progress is being made.

A planning report is an important result of the Formulate Goals and Strategies phase. Give some initial thought to its format and timing. Will it be a short executive summary or a lengthy analytical piece? Both may be useful. Will it be developed entirely during the Formulate Goals and Strategies phase or will several interim reports be combined to form the strategic plan? Will the document be produced by staff, a participant committee, or a consultant? How will it be disseminated? All sponsors and other key participants should be consulted on these issues.

Who will be responsible for carrying out specific activities? While the planning effort is undertaken by the participants, additional support may be needed for conducting the MAPP process and gathering and analyzing information. MAPP is designed so that a community can complete the process without outside technical assistance. However, technical assistance may be valuable in tailoring the process to changing circumstances and facilitating a complex process.

Consider the following sources of technical assistance:
- ✎ **Hire a consultant** with experience and expertise in strategic planning (e.g., a consultant or a faculty member from a local university). It is important to achieve a good match between the community's needs and the consultant's skills and approach. Also, ensure that the consultant is familiar with public health practices and community health improvement processes.
- ✎ **Borrow the services** of planners from other organizations such as hospitals, large businesses, associations, or government agencies. These organizations may or may not be participants in your process.
- ✎ **Train staff** from one or more of the participating organizations in the techniques of community strategic planning, using outside technical assistance and advice (e.g., from NACCHO) where needed.
- ✎ **Use a hybrid** whereby outside assistance is used in the beginning to structure the process and help train local participants or staff to take over at a later time.

Facilitation is an especially important consideration throughout many of the phases of MAPP — see the Tip Sheet — Facilitation within the MAPP Process for more information.

Step 4 — Assess resource needs and secure commitments

While the principal resources for the planning effort are participant time and energy, other resources will be needed as well. These include:
- data collection and information gathering;
- meeting space, meals, and refreshments;
- travel by participants, staff, or consultants;
- report reproduction and printing;
- consultant fees; and
- educational and training materials.

To successfully estimate necessary resources, a solid understanding of planning activities should be established. The budget should serve as both a program and fiscal document, ensuring that funding or in-kind contributions for anticipated resources will be available when needed.

In addition, by identifying the resources that must be secured to complete the planning effort, budgeting brings a closer sense of reality to the process, particularly to decision-makers who must allocate funding. Preparing a budget before the process begins helps to reduce the inclination to "squeeze" existing resources. Securing resources from participating organizations is one of the first tests of commitment to the process. Contributions from participant stakeholders might include donated supplies, meeting space, consulting services, and staff time for data collection or other activities.

The MAPP Budget Worksheet offers additional considerations and provides more specific guidance for developing a budget for the planning process.

Step 5 — Conduct a readiness assessment
The information collected in the previous four steps should provide a clear picture of the pieces that need to be in place to begin the MAPP process. The Core Support Team should use the Readiness Assessment Worksheet to confirm that the community is prepared to begin the MAPP process. The Readiness Assessment identifies both the essential factors to undertaking a MAPP process (critical elements) as well as those that may not be essential, but would enhance the planning effort (desirable elements).

At the conclusion of the readiness assessment, one of several possibilities will emerge:
- All the elements are in place; proceed with strategic planning.
- Proceed with caution, addressing gaps and concerns.
- Wait for a better time to begin, using the time now for preparation and putting all the pieces in place.
- Limit the scope of the planning process, using this experience to set the stage for broader strategic planning at some future time.

When all of the critical elements are in place, it is time to complete the last step and begin the planning process. If even one critical element is missing, however, it is advisable to remedy that deficiency before beginning. If not all of the desired elements are in place, proceed with caution, giving attention to how gaps will be addressed.

Step 6 — Manage the process

The final step is to consider how the process will be managed as it moves along. Managing the process involves paying attention to details so that trusting relationships are built, synergy is maximized, and creative attention is maintained. Meeting and conference logistics, coordinating schedules and activities, circulating materials for review, and clarifying assignments are details that can make or break the planning process.

The following three tools are helpful in managing the process:

?? **The project proposal** organizes the process into one document that outlines the project from inception through completion. The proposal is also useful for orienting participants to the process and generating additional support or sponsorship.

?? **The project workplan** lays out the major activities of the planning process and the anticipated timeframe for their completion. In addition to serving as a management tool for project staff, the workplan makes the process more predictable and task-oriented for everyone. The purpose of the workplan is to guide, not dictate, the planning process. As this process unfolds, revisit the workplan periodically to assess progress and consistency with the original timeline. Revise the workplan as needed. As stated earlier, it is important to incorporate concepts or elements that help customize the process to the community's needs. As the workplan is developed, build in opportunities to celebrate achievements and recognize successes throughout the entire process. The workplan should be developed by members of the Core Support Team. Once completed, present the workplan to the full MAPP Committee for approval. See the Example Timeline/Workplan.

?? **The guiding assumptions,** which are an extension of the project plan, are a initial assumptions or "givens" upon which the project is grounded. Examples of guiding assumptions include the agreement to address specific concerns about which key sponsors feel strongly or the importance of focusing on the whole community and on the public health system as opposed to a single organization.

The proposal, workplan, and guiding assumptions together constitute an initial "contract" between the participants and sponsors that will provide the planning process with sufficient direction to launch the initiative. Other tools include master calendars and mailing lists, sample letters of invitation and meeting announcements, written meeting agendas, the use of sign-in sheets, and the development of project binders for participants. In addition to being useful tools for process management, these also serve to create a record of participants, work, and progress.

Organize for Success/Partnership Development
Chicago, IL Vignette

Prompted by the national Turning Point initiative, in 1998, the Chicago Department of Public Health initiated an effort to strengthen Chicago's local public health system. While grant funding provided minimal incentive, it re-focused the health department's attention on the need to engage its partners in planning for an enhanced system.

A four-member advisory committee included representation from the city health department, the business community, the board of health, and a health policy/advocacy organization. The advisory committee's first task was to agree upon the membership of the planning body, known as the Chicago Partnership. A 29-member body was appointed and included the public hospital, community health centers, governmental agencies with ties to public health, the religious and business communities, health advocacy organizations, philanthropy, and academia.

The Chicago Partnership was organized as a committee that would operate largely by consensus. Workgroups were formed as needed to consider specific issues; however, all formal decisions were made by the full partnership. The partnership met every other month in two- to three-hour sessions with homework assignments carried out between meetings and transmitted to staff via fax or e-mail. Additional meetings were scheduled as needed.

Stakeholder expectations were assessed through a survey sent to all partnership members prior to the initial meeting. Member agencies shared perceptions of both their contributions to the local public health system as well as those of the health department. Survey responses were summarized and presented for discussion at the Chicago Partnership's first meeting.

A draft workplan was developed by staff and presented for approval at the partnership's first meeting. The workplan was revised twice during the process: once when the grantor's schedule required that some tasks be completed earlier than anticipated and again, when the partnership needed additional time to carry out its tasks.

A set of nine guiding principles and assumptions was drafted by staff and the advisory committee and presented to the partnership for consideration. The assumptions were revised and adopted based on comments.

The planning process was supported with limited grant funds supplemented by contributions from the health department which included in-kind support from a deputy commissioner (10 percent), the planning director (50 percent), and a secretary (25 percent). In addition, the health commissioner provided funding for a full-time planner for the effort. In addition to their time, partnership members contributed meeting space and staff support for specific tasks throughout the project.

A vignette from Chicago's experiences is provided throughout every phase of the MAPP process. For information on Chicago's subsequent activities, see the next phase Visioning – Chicago, IL.

Tip Sheet — Guidance for Participant Identification

MAPP is intended to result in the development and implementation of a community-wide strategic plan for public health improvement. Therefore, for the plan to be realistically implemented, it must be developed through broad participation by persons who share the commitment to and responsibility for the community's health and overall well-being. It is unlikely that key implementers will simply adopt the recommendations of a plan for which they had no input. The commitment to implementation will come from the sense of ownership that results from participating in the plan's development.

Framework for Participant Selection
Consider the following issues when identifying and recruiting participants for the MAPP process:

- *Who plays a role in the local public health system?* It is important to include individuals that have a hand in providing public health services. The Essential Public Health Services framework (described below) provides a good starting point.
- *What broad, cross-sectorial participation is needed?* The MAPP Committee should be representative of the overall community. A broad cross-section of residents and organizations is needed for members to be truly representative of the perceptions, interests, and needs of the entire community.
- *What other criteria do they meet?* Consider other issues, such as expertise and access to key assets and resources, the need for diversity and inclusiveness, and long-term availability and interest.

Identifying Possible Participants through the Essential Public Health Services
The Essential Public Health Services provide a useful framework for determining who is responsible for the community's health and well-being. The services reflect core processes used in public health to promote health and prevent disease. Thus, potential participants in the MAPP process would include individuals, organizations, and other entities that contribute to the delivery of one or more of the ten services identified below.

- Monitor health status to identify community health problems
- Diagnose and investigate health problems and health hazards in the community
- Inform, educate and empower people about health issues
- Mobilize community partnership to identify and solve health problems
- Develop policies and plans that support individual and community health efforts.
- Enforce laws and regulations that protect health and ensure safety
- Link people to need personal health services and assure the provision of health care when otherwise unavailable
- Assure a competent public health and personal healthcare workforce
- Evaluate effectiveness, accessibility and quality of personal and population-based health services
- Research for new insights and innovative solutions to health problems.

The Essential Services will be used further in MAPP's Local Public Health System Assessment as a framework for measuring the performance and capacity of the public health system. Because MAPP results in a strategic plan for improving community

health and for creating and strengthening the local public health system, all entities that contribute to the Essential Services should be included throughout the process.

Identifying a Broad Cross-Section of Representation
The following is a list of groups, sectors, and types of organizations that should be considered for participation in the MAPP process. Benefits of inclusion and other considerations are also detailed.

Community representatives: The participation of community members in the MAPP process is essential, not only for obtaining a complete understanding of the community's needs and interests, but also for the development and implementation of workable strategies. In addition to receiving public health services, community members may participate in the delivery of essential services, for instance, informing others about health issues. Community representatives might best be defined as residents and/or consumers of public health services. Representatives might be identified through outreach to clubs and other neighborhood organizations or from the clientele of local providers. It is important to distinguish community representatives from representatives of community-based providers who, while important, may bring a formal provider perspective to the process. Seek diverse representation and new viewpoints, being careful not to limit participation to those who typically represent a community.

Governmental agencies: In addition to the local public health authority or board of health, other agencies contribute to the health of a community. Other governmental agencies may address such issues as aging, social services, environmental protection, mental health, substance abuse, sanitation, and economic development. Including these organizations in the MAPP process helps to more broadly establish and enforce policies that protect the community's health and leverage resources.

Medical care providers: Medical care providers might be represented through local hospitals; health systems; community health centers; emergency medical services; managed care organizations; and professional associations representing nurses, physicians, etc. Participation in the MAPP process increases these representatives' awareness of and appreciation for traditional public health activities, fostering a stronger integration of medical care and public health services.

Education: The MAPP process may benefit from participation by local schools and institutions of higher learning. Outside of the family, schools are one of the few institutions with regular and sustained access to young people. Schools often contribute directly to the essential public health services and can provide the larger public health community with access to this important population. The relationship between education, economic opportunity, and health status suggests that schools are an important partner in the MAPP process. Finally, institutions of higher education, such as community colleges, universities, schools of public health, nursing, and medicine, contribute to several essential services related to assuring a competent workforce, evaluation of services, and research.

Criminal justice: In many communities, the criminal justice and law enforcement systems are valuable partners for public health. The increasing recognition of violence as

a public health issue, coupled with the longstanding concerns about substance abuse, provide points of common interest for the public health and criminal justice systems. Additionally, correctional health programs are a vehicle for the delivery of public health services, while community policing programs may provide a mechanism for further community engagement. Other possible participants might come from the local court system and sheriff's office.

Environmental organizations: While public health work is often prompted by environmental factors (e.g., asthma and lead poisoning), representation from environmental organizations is sometimes overlooked in participatory and collaborative public health initiatives. Appropriate representatives might be found in community-based and non-governmental agencies, forest services, and fish and wildlife departments.

Faith community: In many areas, the faith community can be a powerful force for broadly disseminating public health messages and engaging residents in healthy behaviors.   In addition to neighborhood churches and synagogues, representatives of larger religious membership organizations might be included in the MAPP process.

Business community: By providing employment and economic livelihood, businesses play a critical role in community health and well-being. Through employee wellness programs, worksite safety initiatives, and other activities, the business community contributes to the delivery of some essential public health services. The need for productive and healthy employees and reduced health care costs should provide the business community with incentive to participate.

Philanthropy: Local foundations might participate on the MAPP Committee as supporters of public health services and programs. Through its participation, the philanthropic community becomes aware of the needs and preferred strategies identified through the process and also recognizes that efforts in the community are being coordinated. The knowledge gained through the MAPP process may then be used to encourage subsequent grant-making efforts.

Other Participants: Other organizations or sectors may also be appropriate for participation in the MAPP process. These might include policy and advocacy organizations and coalitions that focus on specific or broader public health issues. Consider representatives that, while not explicitly focused on public health, have the potential to contribute to the health of the community. These might include organizations concerned with issues such as job training, youth development, housing, community economic development, etc. Finally, consider inviting representatives from the media. These individuals may provide valuable advice and input throughout the process and may be helpful in disseminating information and engaging the community.