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**Participate. Educate. Facilitate. Innovate.**

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**2013 ACTION TEAM REPORT**

PHiT



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| **Team Name:** | **Public Health in ToP – PHiT**  |
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| **Team Members:** | **Extensive list – available on web site – current list is 36 members long. Membership is made up of public health professionals using ToP methods and ToP facilitators working with public health clients.** |
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| **2013 Accomplishments** |
| **See attached document: We met all goals established at annual meeting in January 2013 with one exception – we did not hold a face to face learning summit. We created success stories, learned about logic models, Process-Mapped the primary community planning model (MAPP), hosted several planning and meeting webinars created materials for the November focus including a audio slide show describing the major community planning models.** |
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| **2013 Learnings/ Insights** |
| **Webinars worked well for committee meetings but take considerable time to plan and arrange.****We developed new knowledge around using ToP processes in implementation of community health planning models. We also developed a community planning logic model to guide groups in implementation of new health improvement initiatives.** |
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| **2014 Anticipations**  |
| **The Committee decides if it will continue and if so will elect new leadership and support for meetings. It will set new goals for 2014. The website will continue to grow and expand with community planning content and resources for facilitators. This group will continue to lead in development of adaptive processes for community planning and public health planning.**  |
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| **Why you want other ToP Network Members to join you in your efforts:** |
| **This work is synergistic across all ToP members and groups. The broad nature of this committee work takes ToP processes not only into community planning but also into leadership development, community coalition building, and project implementation. The group has become quite adept at virtual meetings – using this forum for learning, decision making and dialog. The current Accountable Care Act being implemented by the federal government has created new activity in community and health planning which has driven demand for facilitation services for community health planning. Currently every hospital and every local public health agency has to do community needs assessment and health planning and demonstrate they are addressing the needs that are identified using a community coalition. This new federally driven demand has expanded the opportunities for local facilitators with knowledge about public health systems and change models. This is a ToP opportunity for all Network members.** |
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**Submitted by: Jane Schadle, 2014**

**PHiT Committee**

PHiT

**What we have done in 2013**

1. **Goal # 3:** Created a success stories format, form and called for stories to be shared for learning purposes. Stories are gathered on our committee web site and accessible. We ask that facilitators get their client’s permission to share their story. To prepare our committee for this work we explored the elements that make up a success story and identified the kind of stories that are worthy of being shared. We also created a story template and examples to help writers develop their own stories.
2. **Goal # 2:** Explored community health planning models and steps in models and for the MAPP model identified the ToP processes that would facilitate that model step. This demonstrates the importance of pairing planning models with group processes in order to accomplish the larger and more comprehensive task of community health planning with a coalition. While the committee looked at the steps for other community planning models – the MAPP Model is the one most specific to public health and community health planning. Process mapping of this model creates the template for doing similar mapping of other models.
3. **Goal # 1**: Explored and learned about logic models in order to teach facilitators about logic model formats that are one cornerstone of public health, community health and health planning. Logic models are often required components of grants and depict the overarching project design. The work of designing the logic model is a group process for community work but is a more specialized process if the logic model is for evaluation or measurement purposes. A community health planning logic model was developed as a model for facilitators leading community planning and project implementation processes.
4. **Committee Meetings**: PHiT held three committee webinars and four small group planning webinars in the completion of our original work plan. A face to face meeting was originally envisioned but while we planned for three separate dates and two different sites, the group was unable to come together for a community planning summit. The funds requested for this item were the majority of the PHiT request and were returned to the Network. PHiT will meet at annual meeting
5. **Web Site:** Develop PHiT web site for communication, posting notices and announcements and to hold documents including process documents, facilitation outlines, and conversations, meeting documents and other relevant documents for community facilitators. Committee member list and contact information is available on the web site. Dialog blogs allow members to discuss issues or processes as they serve community clients. Resource documents are posted. A Committee avatar/Icon was created as a colorful adjunct to the ToP Network logo and posted on the website and made available for copy or download.
6. **Communication**: Articles for Newsletter and for posting on PHiT Committee site were developed including multiple short articles and fact sheets. Meeting notes have been developed and posted. Issue papers, community conversations and other resources have been developed and posted on the website. Some ToP processes that were modified for community use or for large groups have also been posted as resources.
7. What we will do:
	1. **Meet during annual meeting in Minnesota in January 2014 for review of the committee work, elect to continue the committee and work, and if continuing then to elect new chair and support positions**.
	2. **Sponsor one acrobatic session during the annual meeting and a follow up session for learning about the use of the WAVE process** – to be taught by the developer of the WAVE, Mirja Hansen.

**Report respectfully offered**

**Jane Schadle, 2013 PHiT Committee Co-Chair.**