

# **FLEXED**

## **Virtual Community (VC)**

### **Webinar 4:**

#### **Future Ready Epidemiology**

#### **Flexible Communication –**

#### **Communicating Public Health**



# **Workbook**

# Welcome!

**Thank you for joining us for this  
NACCHO FLEXED Webinar on  
November 13th, 2025, part of the  
NACCHO FLEXED Virtual Community  
(VC) Learning Series.**

This workbook contains all the activities and interactive items from the workshop, plus the tools and graphics you need to help facilitate your understanding of the topics covered during our time together.

**We encourage you to use this workbook as a tool  
as you move forward with your mission to  
strengthen your LHD's ability to  
effectively communicate public health.**

# COMMUNICATING PUBLIC HEALTH

We are not just data and information reporters, we are public health communicators, translators, and advocates. Every interaction in which we engage is an opportunity to convey the value of public health to those we serve.

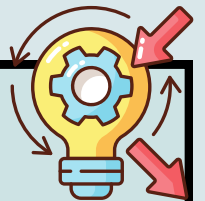
In this workbook, you will strengthen your knowledge, skills and abilities in communicating public health.

We must become strategic communicators, social marketers, and constant advocates beyond our services and for our entire field.

## **REFLECT:**

**WHAT IS THE MOST IMPORTANT "RESOURCE" YOUR COMMUNITY RECEIVES FROM YOUR LHD?**

HINT: It's not any of the services you provide - it's the state of being and/ or emotion derived from those receiving that service, benefiting from that service, or knowing it is available if they need it. (Think safety, comfort, confidence, stability, ease, peace of mind... what else? What precious resource does your community receive from the services you provide?)



# THE MUTUAL VALUE PROPOSITION STATEMENT

**We reviewed the process for the Mutual Value Proposition and Elevator Speech in webinar 3, and dove much deeper into them in the related Peer Learning Hour.**

**Webinar 4 will build upon these efforts by emphasizing the crucial nature of developing trust and credibility, knowing your audience and being aware of what you have to offer each other as you strive to communicate public health, so be sure you have walked through those exercises before you continue on with the new content that begins on page 22.**

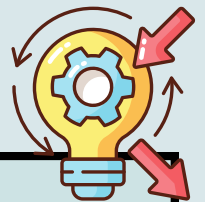
Being clear about your partnerships as you communicate public health:

- means being clear about what to ask and what to offer
- ensures a mutual and fair exchange/ reciprocity
- ensures shared expectations
- Facilitates introductions, engagement, and ongoing development

**KNOW what is of value to your partner and what you have to offer them**  
**KNOW your audience for building trust and credibility**  
**Know and develop these BEFORE an event occurs**

## **REFLECT:**

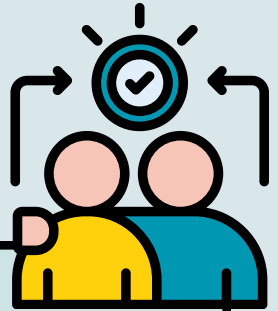
**WHO ARE THE PARTNERS THAT COULD ADD VALUE TO YOUR WORK - THINK BEYOND THE TRADITIONAL COLLABORATIONS!**



# THE WORKSHEET

## MUTUAL VALUE PROPOSITION

### What You Need from This Partner



"I want to work with this partner because..."

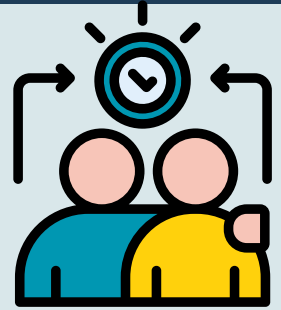
"The information I most need from this partner is..."

*notes:*

# THE WORKSHEET

## MUTUAL VALUE PROPOSITION (CONTINUED)

### What This Partner Needs from You



"This partner would want to work with my agency because..." (Check all that apply)

- Risk reduction for their organization
- Access to our expertise and resources
- Credibility and reputation protection
- Regulatory compliance support
- Community benefit and public safety
- Early warning of health threats
- Professional networking opportunities
- Other:

The information they most need from my agency is...

## Mutual Value Proposal:

“Our LHD is preparing for future x outbreaks. We are reaching out to agencies in our community whose services are crucial during an event; to introduce ourselves and talk about how we can support each other’s efforts before/ during/ and after an outbreak. We think our

\_\_\_\_\_ can serve your agency/ teams/ clients, by supporting your efforts to

\_\_\_\_\_ and your

\_\_\_\_\_ would be instrumental in helping us

# MUTUAL VALUE PROPOSITION

## **EXAMPLE 1:**

**Partner: Congressional Aide  
(influences a local politician's vote)**



**“What I need from this partner”**

- **Timely visibility into upcoming public-health-relevant votes, committee input, or hearings**
- **Access to the legislator for concise technical briefings during outbreaks**
- **Guidance on how to frame evidence so it is understood by constituents and colleagues**

**“I want to work with this partner because...”**

- **They are the most efficient conduit to ensure outbreak response needs (data-sharing authority, emergency funds, mutual aid) are understood and acted upon quickly.**

**“The information I most need from this partner is...”**

- **Legislative timelines, committee priorities, decision criteria, and opportunities to provide testimony or one-pagers.**

**WHAT RESOURCES DO YOUR LOCAL LEGISLATORS HAVE  
THAT YOU NEED?**

# MUTUAL VALUE PROPOSITION

## EXAMPLE 1:

### Partner: Congressional Aide (continued...)



“What this partner needs from me

- Rapid, non-jargony briefs grounded in local data
- Clear “if/then” options and constituent impact (jobs, schools, farms)
- Credible talking points they can use with the legislator and stakeholders
- (They likely value:  Credibility & reputation protection  Early warning of health threats  Community benefit & public safety  Access to expertise)

**WHAT RESOURCES DO YOU HAVE  
THAT YOUR LOCAL LEGISLATORS NEED?**

# MUTUAL VALUE PROPOSITION

## Partner: Congressional Aide (continued...)



### **SAMPLE MVP:**

“Our LHD is preparing for future foodborne and respiratory outbreaks. We are reaching out to agencies in our community whose services are crucial during an event; to introduce ourselves and talk about how we can support each other’s efforts before/during/and after an outbreak.

**We think our ability to** translate surveillance data into clear, one-page legislative briefs and rapid district-level situation updates

**can serve your agency/teams/clients by** supporting your efforts to equip the Representative with accurate, actionable, and constituent-focused talking points.

**And your** insight into legislative calendars, priorities, and access pathways would be instrumental

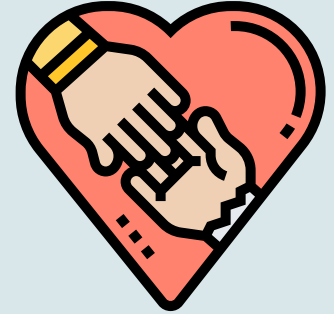
**in helping us** time our guidance effectively and secure the enabling policies/resources needed for swift response.

### **NOTES**

# MUTUAL VALUE PROPOSITION

## EXAMPLE 2:

**Representative of a Philanthropic Organization (potential funder)**



**“What I need from this partner”**

- Flexible micro-grants for surge staffing, printing, and community-partner stipends
- Support for rural data/IT gaps (dashboards, SMS alerts)
- Introductions to other funders with aligned missions

**“I want to work with this partner because...”**

- Philanthropy can fill crucial speed and flexibility gaps that public dollars can’t, especially in rural settings.

**“The information I most need from this partner is...”**

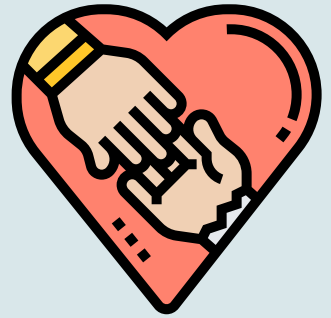
- Grant windows, eligible uses, reporting expectations, and examples of funded projects they consider high-impact.

**WHAT RESOURCES DO PHILANTHROPIC ORGANIZATIONS  
HAVE THAT YOU NEED?**

# MUTUAL VALUE PROPOSITION

## EXAMPLE 2:

Representative of a Philanthropic Organization (potential funder)  
(continued...)



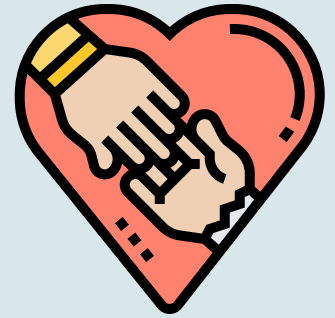
“What this partner needs from me”

- A concrete case for use of funds needed, with measurable community outcomes
- A strong but lean budget, realistic timeline, and sustainability plan
- Credible community-partner letters and a clear equity rationale
- (They likely value:  Community benefit & public safety  Access to our expertise/resources  Professional networking  Risk reduction for their organization via strong stewardship)

**WHAT RESOURCES DO YOU HAVE  
THAT PHILANTHROPIC ORGANIZATIONS NEED?**

# MUTUAL VALUE PROPOSITION

## Representative of a Philanthropic Organization (potential funder) (continued...)



### **SAMPLE MVP:**

“Our LHD is preparing for future norovirus and well-water contamination outbreaks. We are reaching out to agencies in our community whose services are crucial during an event; to introduce ourselves and talk about how we can support each other’s efforts before/during/and after an outbreak.

**We think our** evidence-based outreach model with mobile “pop-up” testing, SMS boil-water alerts, and mini-grants to trusted community messengers

**can serve your agency/teams/clients, by** supporting your efforts to achieve measurable, equitable prevention outcomes in rural communities,

**and your** flexible funding and convening power would be instrumental

**in helping us** stand up rapid communication infrastructure and evaluate impact within 6–9 months.



# MUTUAL VALUE PROPOSITION

## **EXAMPLE 3:**

**Local Business Owner (stake in public health-e.g., food processor or diner)**



**“What I need from this partner”**

- Early heads-up on supply chain issues, staff illness clusters, and customer complaints
- Willingness to pilot improved hygiene/employee illness policies
- A channel to reach other businesses (peer learning, storefront posters)

**“I want to work with this partner because...”**

- Local businesses are front-line sentinels; their cooperation can shorten outbreaks and protect livelihoods.

**“The information I most need from this partner is...”**

- Operational pain points, feasible mitigation steps, and the best times/channels to train staff without disrupting service.

**WHAT RESOURCES DO LOCAL BUSINESS OWNERS HAVE THAT YOU NEED?**

# MUTUAL VALUE PROPOSITION

## EXAMPLE 3:

**Local Business Owner (stake in public health-e.g., food processor or diner)  
(continued...)**



**“What this partner needs from me”**

- **Practical, plain-language guidance that doesn’t sink operations or threaten closure**
- **Rapid clearance templates (e.g., “safe to reopen”) and signage**
- **Access to a direct contact for urgent questions**
- **(They likely value:  Risk reduction for their organization  Regulatory compliance support  Credibility & reputation protection  Early warning)**

***WHAT RESOURCES DO YOU HAVE  
THAT LOCAL BUSINESS OWNERS NEED?***

# MUTUAL VALUE PROPOSITION

**Local Business Owner (stake in public health-e.g., food processor or diner)  
(continued...)**



## **SAMPLE MVP:**

“Our LHD is preparing for future salmonella and norovirus outbreaks. We are reaching out to agencies in our community whose services are crucial during an event; to introduce ourselves and talk about how we can support each other’s efforts before/during/and after an outbreak.

**We think our** on-site food-safety coaching, illness-policy templates, and same-day “clear to operate” guidance can

**serve your agency/teams/clients, by** supporting your efforts to keep your staff and customers safe while minimizing downtime, and

**your real-time feedback** from the kitchen floor and willingness to share lessons with peer businesses would be instrumental

**in helping us** detect issues earlier and scale workable solutions across the county.”



# MUTUAL VALUE PROPOSITION

## EXAMPLE 4:

### Partner: Town-Hall Member Who Distrusts Public Health



“What I need from this partner”

- Insight into community concerns, language, and messengers that residents trust
- A reality check on how our messages land and where trust breaks
- Willingness to co-design outreach (e.g., forums, FAQs) and validate clarity

“I want to work with this partner because...”

- They are a critical voice among residents we need to reach most; partnering early builds legitimacy we can't manufacture.

“The information I most need from this partner is...”

- Specific trust barriers, preferred channels (church groups, ag co-ops, local radio), and questions we haven't answered plainly.

**WHAT RESOURCES DO LOCAL, VOCAL CITIZENS WITH PUBLIC HEALTH DISTRUST ISSUES HAVE THAT YOU NEED?**

# MUTUAL VALUE PROPOSITION

## EXAMPLE 4:

### Partner: Town-Hall Member Who Distrusts Public Health (continued...)



“What this partner needs from me”

- Humility, transparency (what we know/don't), and plain language
- Predictable follow-through and opportunities to hold us accountable
- Data connected to everyday impacts (wells, schools, harvest)
- (They likely value:  Community benefit & public safety  Early warning of health threats  Credibility & reputation protection-on both sides  Other: Respectful two-way dialogue)

**WHAT RESOURCES DO YOU HAVE THAT LOCAL, VOCAL  
CITIZENS WITH PUBLIC HEALTH DISTRUST ISSUES NEED?**

# MUTUAL VALUE PROPOSITION

## Partner: Town-Hall Member Who Distrusts Public Health (continued...)



### SAMPLE MVP:

“Our LHD is preparing for future respiratory and waterborne outbreaks. We are reaching out to leaders in our community whose voices are crucial during an event; to introduce ourselves and talk about how we can support each other’s efforts before/during/and after an outbreak.

**We think our** commitment to co-host plain-talk town halls, publish short “what we know/what we don’t” updates, and show the data behind decisions can

**serve your group’s needs by** supporting your efforts to get straight answers and shape messages that fit local realities, and

**your** honest feedback, questions, and help pressure-testing our materials with neighbors you trust would be instrumental

**in helping** us close information gaps, correct mistakes quickly, and earn durable trust.



# THE ELEVATOR PITCH

**DRAFT YOUR 30-SECOND INTRODUCTION:**

Hello, I'm

(your name)

From

(your agency, county, city)

We

(your agency's role in the community)

I

(your role in the agency)

I'm reaching out because

I'd like to

(why you are contacting them - mutual value proposal)

(what you would like - establish contact? collaborate? get something?)

# THE ELEVATOR SPEECH

The "elevator speech" is a career and partner must to convey quickly, clearly, and professionally, to establish connection, prevent lost opportunities to(re)introduce, and maximize memorability.

When combined with the mutual value proposition, this is a powerful tool in establishing credibility and a first step in knowing your audience.

Grants, funding, cooperative agreements are now requiring interviews- the elevator speech is a great place to start: "Tell me about your work..."

Customize for different audiences, and be sure to revise overtime!

## **EXAMPLE 1:** Congressional Aide



**Hello, I'm** Dr. Jordan Lee.

**From** the Red Oak County Health Department.

**We** provide clear, local health information so leaders and residents can act quickly during outbreaks.

**I serve as** the lead epidemiologist who turns surveillance data into plain-language briefs.

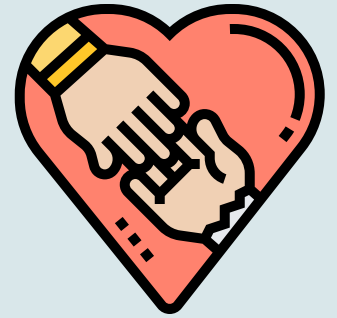
**I'm reaching out because** your office decides on items that affect outbreak response, and timely, local facts can prevent surprises for schools, farms, and shift workers.

**I'd like to** set up a 10-minute touchpoint meeting with you before our health-related hearings this month; where can I send a one-page sample brief for your review?

# THE ELEVATOR SPEECH

## EXAMPLE 2:

### Philanthropic Organization Representative



**Hello, I'm** Dr. Jordan Lee.

**From** the Red Oak County Health Department.

**We** help rural neighborhoods respond to issues like norovirus and well-water contamination with practical tools residents trust.

**I** coordinate our outbreak response and evaluation.

**I'm reaching out because** flexible, small grants help us start mobile testing and SMS boil-water alerts quickly and show short-term results.

**I'd like to** schedule a 20-minute call with you next week, where can I send our concept page?

## NOTES

# THE ELEVATOR SPEECH

## EXAMPLE 3:

### Local Business Owner



**Hello, I'm** Dr. Jordan Lee.  
**From the Red Oak County Health Department.**

**We** help local businesses stay open safely when illnesses like salmonella or norovirus appear.

**I** provide brief on-site walk-throughs to help you identify issues, illness-policy templates, and same-day guidance to support you in real time.

**I'm reaching out because** your diner is a hub for the community, and small steps can reduce sick days without slowing service.

**I'd like to** send you our idea for a pilot project with you and two peer businesses and then set up a group call. What is the best way to reach you?

## NOTES

# THE ELEVATOR SPEECH

## EXAMPLE 4:

### Skeptical Town-Hall Member



**Hello**, I'm Jordan Lee.

**From** the Red Oak County Health Department.

**We** help our county's families make strong and steady choices about wells, schools, and harvests by sharing what we know-and what we don't-in plain words.

**I** compile the local data and help host open forums so everyone's voices are heard.

**I'm** reaching out because your perspective helps us focus our message, remove jargon, and address real concerns before we publish our updates.

**I'd like to** meet for 15 minutes after tonight's session so we can talk about collaborating on our one-page updates; by working together we can revise what doesn't ring true to you while still being accurate.

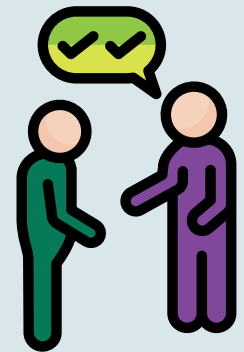
## NOTES

# APPEALS PERSUASION TECHNIQUE

## PRACTICE SCENARIO

A local restaurant owner is resistant to cooperating with your foodborne illness investigation. In your workbook, craft a 2-3 sentence response using the APPEALS framework.

- **A**cknowledge their perspective
  - What do they want to know?
  - How does it need to be said? By whom? Where? When?
- **P**resent your data/concern - Transform complex data into clear, actionable messages
- **P**ropose specific action
- **E**xplain benefits to them
- **A**sk for understanding and commitment
- **L**isten to their response/concerns
- **S**OCO



# THE CLEAR METHOD

## TRANSLATING COMPLEX INFORMATION

- **C**ontext: Why does this matter to them?
- **L**anguage: What vocabulary? Use theirs not yours; this includes literacy levels.
- **E**ssentials: What's the core message?
- **A**ction: What do you want them to do?
- **R**elevance: How does this impact them specifically?

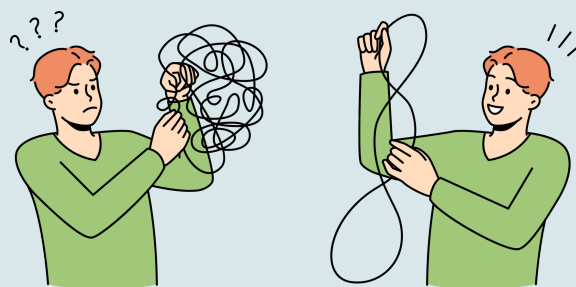
## THE DATA TRANSLATION CHALLENGE

**Audience Translation Exercise:** translate our outbreak data for these three audiences using the CLEAR method

- Restaurant Owner: (Focus: reputation, legal liability, customer safety)
- Local Media: (Focus: public safety, what residents should know)
- Hospital Administrator: (Focus: patient volume, clinical implications)

### Sample Data Set:

- **47 confirmed cases of Salmonella enteritidis**
- **Attack rate of 23% among restaurant patrons**
- **Median incubation period: 18 hours**
- **Significant association with consumption of Caesar salad**
- **(OR 4.2, CI 1.8-9.7,  $p < 0.05$ )**



# THE CLEAR METHOD

## TRANSLATING COMPLEX INFORMATION

- **C**ontext: Why does this matter to them?
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- **R**elevance: How does this impact them specifically?



**Restaurant Owner:**

**(Focus: reputation, legal liability, customer safety)**

**Sample Data Set:**

- **47 confirmed cases of Salmonella enteritidis**
- **Attack rate of 23% among restaurant patrons**
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# THE CLEAR METHOD

## TRANSLATING COMPLEX INFORMATION

- **C**ontext: Why does this matter to them?
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- **A**ction: What do you want them to do?
- **R**elevance: How does this impact them specifically?



### Local Media:

(Focus: public safety, what residents should know)

### Sample Data Set:

- 47 confirmed cases of Salmonella enteritidis
- Attack rate of 23% among restaurant patrons
- Median incubation period: 18 hours
- Significant association with consumption of Caesarsalad (OR 4.2, CI 1.8-9.7,  $p < 0.05$ )

# THE CLEAR METHOD

## TRANSLATING COMPLEX INFORMATION

- **C**ontext: Why does this matter to them?
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- **R**elevance: How does this impact them specifically?



**Hospital Administrator:**

**(Focus: patient volume, clinical implications)**

### Sample Data Set:

- 47 confirmed cases of Salmonella enteritidis
- Attack rate of 23% among restaurant patrons
- Median incubation period: 18 hours
- Significant association with consumption of Caesarsalad (OR 4.2, CI 1.8-9.7,  $p < 0.05$ )

# RESPONDING TO MISCOMMUNICATIONS


## THE RECOVERY PROTOCOL

When miscommunications happen (and they will):

- Acknowledge quickly: "I realize my earlier message wasn't clear, thank you for bringing that to my attention..."
- Clarify simply: "I was trying to say ..."
- Confirm understanding: "Does this make sense now?"
- Follow up: Check back to ensure the correction stuck

## REFLECTION

Think of a recent miscommunication. Upon reflection, which trigger do you think caused it? What is one way you could have prevented it?



# THE COMMUNICATION QUICK PRE-CHECK

Prior to speaking with your audience, reflect on these items and rate yourself 1-5 for each competency. In any area where you rate yourself less than 4, note how you can improve that element prior to and after the event:

- **Trust-building:** Is my information accurate and confirmed? Have I taken any steps to know this audience? Do I need to address any miscommunications, misunderstandings or misinformation before I communicate?

**SCORE 1-5:**

- **Clarity:** Will people understand what I'm saying? If not, what do I need to revise? Using what sources/information?

**SCORE 1-5:**

# THE COMMUNICATION QUICK PRE-CHECK

- **Empathy:** Do I acknowledge others' perspectives and concerns? If not, what do I need to consider, add, or change?

**SCORE 1-5:**

- **Relevance:** Am I communicating information people need when, where, and how they need it? If not, is a better time and/ or place possible? Can I ask others how it will best be received?

**SCORE 1-5:**

**Consistency:** Are my messages aligned across different conversations?

**SCORE 1-5:**

# What Are Your Next Actionable Steps?



**In the Next 48 Hours I Will:**

**In the Next Week I Will:**

**In the Next Month I Will:**

# What Are Your Next Actionable Steps?

Take  
the Next Step  
Now

## SOME IDEAS!

### In the Next 48 Hours I Will:

- Make a list of the public health communication and persuasion competencies I want to develop or strengthen.
- Schedule to take at least one of the related trainings on the curated list.
- Reach out to at least 1 VC participant to discuss the topic.
- Continue to gather or share knowledge on partner communications using the VC - Post a question, comment or information on the platform.

### In the Next Week I Will:

- Choose one message I need to send this week and rewrite it using the CLEAR method
- Identify one partner and communication where I'll practice the APPEAL framework
- Draft an outline of steps that I need to take to strengthen my KSAs in the areas I identified in the first 48 hours.
- Share key elements of that outline with at least one colleague, a mentor, and/ or a supervisor to discuss my outline.

### In the Next Month I Will:

- Use my outline to develop a timeline and workplan for improving my competencies in the identified areas.
- Determine what resources would be required for my outline.
- Determine which colleagues can work with me to expand our collective competencies and provide support.

