

Process for Selecting Final Goals for the Community Health Improvement Plan:

- 1.) The selection process took place at the Goal-Setting and Strategic Approach Meeting of our Health Improvement Partnership- Cuyahoga Planning Committee (July 17, 2013)
- 2.) Participants were provided with the summary document from the community conversations and the results of the environmental scan survey
- 3.) Committee also participated in the Health Equity and Racism Knowledge Workshop on July 16, 2013, so that individuals would have the knowledge to develop goals that address the root causes of poor health
- 4.) The following actions were taken :
 - a. Small groups were formed based on the four priorities (chronic disease management; improved coordination between clinical and public health; eliminating racism as a social determinant of health; and improved nutrition and physical activity)
 - b. Each group was charged with developing both public health infrastructure and community goals for their respective priority (this was done by using the HIP-C matrix- this is included in the Goal Setting and Strategic Approach Meeting folder in drop box)
 - c. Each group was also charged with brainstorming potential strategic approaches for the goals
 - d. Through small group consensus each group selected the goals that they would like to move to a vote from the entire group; Prioritization criteria included:
 - i. Potential to make a measurable improvement
 - ii. Potential for return on investment
 - iii. Potential for an impact within two years
 - iv. Degree to which it reduces inequities and disparities
 - v. Ability to use evidence-based practices in addressing the goals
 - vi. Support of the key stakeholders necessary to make a difference

- vii. Availability of resources (staff, time, money, etc)
- e. Each group posted their top goals and each committee member was given two stickers that they could use to choose their top two goals in each of the four priority areas
- f. The top three goals (those that received the most votes) for each priority area were selected (final list of goals included in the goals and evidenced based intervention strategies folder in drop box). This list also includes *potential* strategic approaches that were also developed in the small groups. The final strategic approaches will be determined at a later date by the priority area subcommittee members.