

Objectives	Description (pre-filled)	Is This Activit
Town of Needham	Last Reviewed: [Date]	
Reporting	R1: Review and update each sheet per reporting period Individual Payments Staffing Chart Activities Tracker SSA Summary	
Grant Administration	PHE Grant Requirement 1: Grant Administration: Complete/perform all PHE Grant Program contractual requirements for the upcoming fiscal year Attend monthly PHE Grantee meetings – ensure attendance of lead municipality and Shared Services Coordinator (SSC), or a designated alternate. Submit a list of Participating Municipalities to Program Coordinator by July 31st and notify Program Coordinator within 30 calendar days of a change in Participating Municipalities. Maintain Letters of Commitment (LOC) from all Participating Municipalities in the SSA. Complete and submit PHE triannual reports in collaboration with your Shared Services Coordinator and all municipalities within the SSA.	

Governance

Governing bodies established through the Intermunicipal Agreement (IMA), shall meet a minimum of once per quarter.

Send annual notification to all Participating Municipalities no later than October 31st of each grant year. Such notification shall be substantially consistent with Attachment 1 of the PHE Engagement Scope in terms of required language and addressee list. Proof of notification shall be submitted to Program Coordinator no later than November 15th of each fiscal year.

Ensure that all Participating Municipalities maintain 100% continuous MAVEN coverage which means that each Participating Municipality has an active, designated MAVEN user and back-up user.

Complete the biannual supplemental reporting survey (T2 and T3)

PHE Grant Requirement 2: Governance: Execute and maintain IMA or equivalent

If you haven't already done so, Complete the Technical Assistance Request Form and select "IMA development"

Working with Massachusetts Association of Health Boards (MAHB), draft IMA in accordance with PHE Engagement Scope.

Circulate draft to Participating Municipalities and schedule a meeting to review and discuss.

Working with MAHB, incorporate edits and revisions as needed.

Request legal review by host municipality and subsequently legal review by Participating Municipalities in consultation with MAHB.

Schedule Board of Health and Select Board meetings as necessary to approve and execute final version of IMA. Provide IMA in advance of meetings and ensure adequate representation at meeting to answer questions.

FPHS Review

Submit a fully executed IMA to Program Coordinator no later than October 31, 2024

PHE Grant Requirement 3: FPHS Review: Participate in trainings, a capacity and expertise review (SSA-level), and cost reporting related to the Foundational Public Health Services (FPHS).
FPHS Checklist

Attend Foundational Public Health Services (FPHS) Framework review trainings and technical assistance meetings, and gather necessary documents (e.g., municipal budgets).

Have your Shared Services Coordinator facilitate discussions with your SSA about capacity and expertise within the FPHS Foundational Areas and Foundational Capabilities to prepare for the capacity and expertise SSA-level review and cost reporting.

Complete the FPHS Shared Services Review collaboratively with your SSA (early 2025).

Sustainability 1

5 - Inventory Management: Establish an inventory management system to streamline procurement processes and accurately monitor all purchases

Develop an SOP and/or implement a transparent tracking mechanism for inventory management related to the PHE Grant Program related purchases.

Itemize all purchases made by the SSA purchases, ensuring comprehensive documentation of procurement transactions.

Train staff members on the newly established inventory management procedures.

Implement quarterly audits to refine the process, maintain accuracy, and identify any discrepancies.

Sustainability 2	2 -Strategic Planning: Develop a shared vision to inform future work Facilitate strategic planning workshops to identify service gaps, resource constraints, ensure SSA sustainability, and opportunities for collaboration among SSA municipalities. Develop a strategic vision and mission statement that aligns with the goals of the SSA and reflects the collective interests of all municipalities. Present findings of strategic planning process to each community board of health. Evaluate existing contracted services and identify opportunities for merging (combining similar contracts) or expansion (expanding existing contracts to serve additional municipalities) within the SSA.	
Performance Standards 1	1 - Enhance staff capacity to effectively meet mandated inspectional requirements and enforce regulations, in alignment with the Performance Standards for Local Public Health	
Performance Standards Topic Area	Environmental Health	
Performance Standards Racial Equity Consideration	Workforce Diversity: create a work culture of diversity, equity, inclusion, and belonging, that values different viewpoints and lived experiences to improve employee satisfaction & retention	

	Have all member municipalities complete the Self-Assessment for updated staffing needs. Create an SOP for how member municipalities request inspectional support. Create a system for managing and supervising staff that offers clear guidance on job responsibilities, mechanisms for support, and mentoring. Guidance should also include ways to handle conflicts in the SSA. Create an SOP for hiring. This should include procedures for securing approval at both the SSA and municipal levels, drafting and approving job descriptions, posting mechanics, selecting final candidates, salary expectations, incorporating workforce regulations, addressing future education and training needs, and ensuring fair and equitable hiring practices. Carry out the hiring plan, making sure to follow the set timelines, procedures, budget limits, while also ensuring representative diversity.	TRUE
Performance Standards 2 Performance Standards Topic Area	4 - Disease Control and Prevention: Ensure adherence to infectious disease case investigation requirements, while enhancing staff training, capacity, and quality improvement initiatives Disease Control and Prevention	

Performance Standards Racial Equity Consideration

CLAS Standards: advancing health & racial equity, through data collection, and diversifying workforce to represent community; ensuring language access & meaningful two-way communication

Develop standardized protocols for case investigations, outlining clear steps for immediate disease acknowledgment within 48 hours and routine disease acknowledgment within 7 days. Assess staffing and workload to allocate resources effectively for infectious disease investigations and epidemiology, adjusting staffing models as needed for sustainability and ensuring coverage with backup staff when necessary. Establish mechanisms for ongoing monitoring and evaluation of infectious disease case investigation activities and epidemiological trends to maintain high standards of quality and efficiency, identifying and addressing areas for improvement as necessary. Create a comprehensive resource hub on infectious disease case investigation procedures, including proper documentation, communication protocols, and epidemiological data reporting requirements.

TRUE

TRUE

Performance Standards 3

3 - Facilitate targeted training opportunities for staff members to address gaps in meeting the Performance Standards for Local Public Health.

Performance Standards Topic Area

Tobacco Use Prevention

Performance Standards Racial Equity Consideration

CLAS Standards: advancing health & racial equity, through data collection, and diversifying workforce to represent community; ensuring language access & meaningful two-way communication

Utilize tools such as the SSA Capacity Assessment Results Toolkit (CART) and Performance Standards Self-Assessment Tool and Addendum to identify areas for improvement within the SSA

Seek out training resources, such as TRAIN MA, to ensure all necessary staff members complete relevant trainings addressing identified gaps in meeting the Performance Standards within the SSA.

Create and utilize a system to gather input from staff members on the effectiveness and relevance of completed training sessions, utilizing this feedback to improve the selection of future training opportunities.

Encourage cross-training and tagalong inspections among SSA member municipalities.

Elective 1

7- Education, Training, and Credentialing: Assess and plan for all staff to work towards meeting the Workforce Standards

**Elective Racial Equity
Consideration**

Workforce Diversity: create a work culture of diversity, equity, inclusion, and belonging, that values different viewpoints and lived experiences to improve employee satisfaction & retention

Document all current municipal and shared staff's progress in completing all appropriate/required trainings in alignment with the Workforce Standards for Local Public Health.

Ensure all staff within the SSA have completed ICS100/NIMS 700 and for those with a leadership role, ICS 200.

Ensure staff who have worked for local or state public health for at least 7 years, but who do not meet these requirements, request a Workforce Development Standards Waiver.

Ensure all employees have an TRAIN MA account.

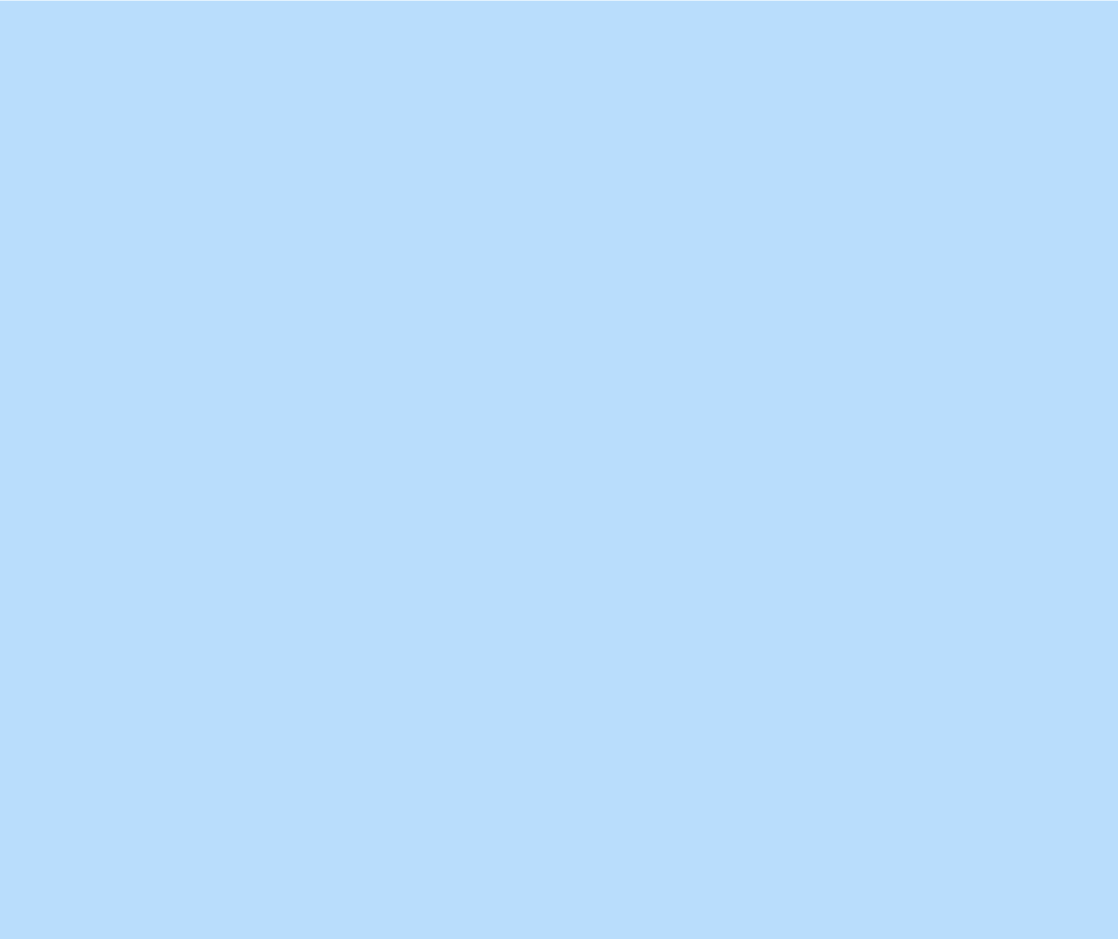
LPH and SSA prioritize integrating and completing Local Public Health Training Program Tier 1 Foundational Knowledge TRAIN MA, Tier 2 Local Public Health Intensive Training and Tier 3 Applied Practice Local Public Health Training Hub into onboarding plans for all new hires.

Staff Lead	Support Staff	Start Date	End Date
Kerry Dunnell	Sam Menard	07/01/24	06/30/25
Administrative Specialist	Kerry Dunnell	07/15/24	07/31/25
Administrative Specialist	Kerry Dunnell	07/01/24	06/30/25
Kerry Dunnell	Jen Casey	07/01/24	06/30/25

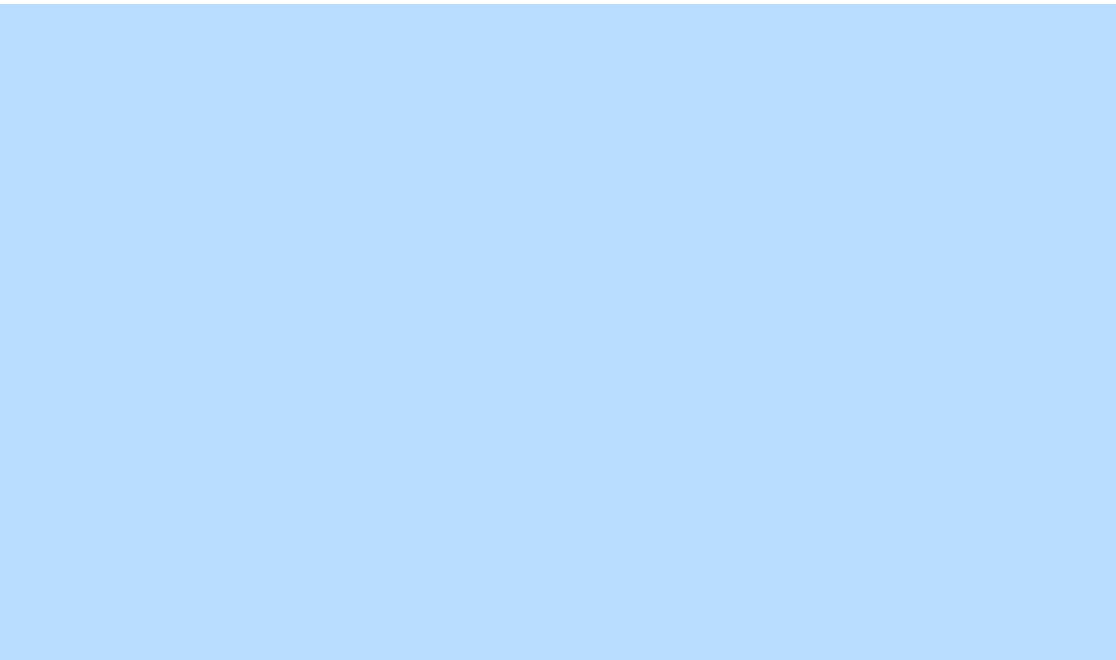
Kerry Dunnell	Sam Menard	07/01/24	06/30/25
Kerry Dunnell	Adminstrative Specialist	07/15/24	11/15/24
Regional Public Health Nurse	Sam Menard	08/01/24	09/30/24
Kerry Dunnell		11/01/24	06/30/25
Kerry Dunnell	10/1/2023	10/01/23	
Kerry Dunnell	10/15/2023	10/15/23	
Kerry Dunnell	1/1/2024	04/30/24	
Kerry Dunnell	1/1/2024	03/31/24	
Kerry Dunnell	1/5/2024	05/01/24	
Kerry Dunnell	7/15/2024	08/31/24	

Kerry Dunnell	9/1/2024	10/31/24	
Kerry Dunnell	Sam Menard	11/01/24	06/30/25
Kerry Dunnell	Administrative Specialist	09/01/24	06/30/25
Kerry Dunnell	Sam Menard	10/01/24	06/30/25
Sam Menard	Kerry Dunnell	07/01/24	02/28/25
Sam Menard	Adminstrative Specialist	07/01/24	07/31/24
Sam Menard	Kerry Dunnell	01/01/25	02/28/25
Sam Menard	Kerry Dunnell	01/01/25	06/30/25

Kerry Dunnell	Administrative Specialist	12/01/24	06/30/25
Kerry Dunnell	Administrative Specialist	12/01/24	06/30/25
Kerry Dunnell	Regional Environmental Health Inspector	03/01/25	06/30/25
Regional Environmental Health Inspector	Kerry Dunnell	10/01/24	02/28/25

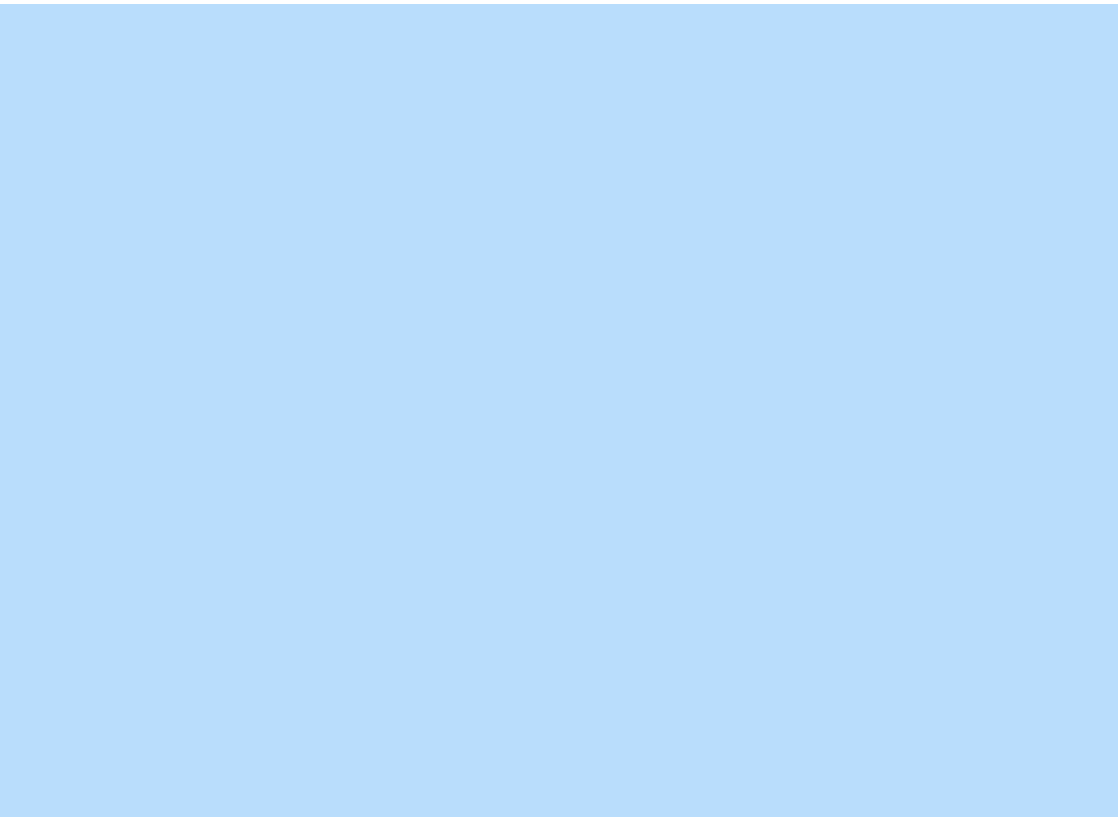


Regional Environmental Health Inspector	Administrative Specialist	10/01/24	11/30/24
Regional Environmental Health Inspector	Sam Menard	10/01/24	02/28/25
Kerry Dunnell	Sam Menard	07/01/24	06/30/25
Sam Menard	Kerry Dunnell	07/01/24	02/28/24
Sam Menard	Kerry Dunnell	07/01/24	06/30/25

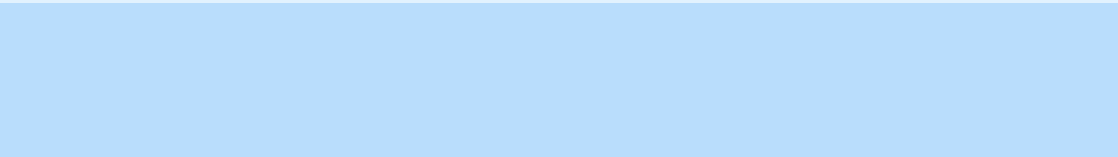


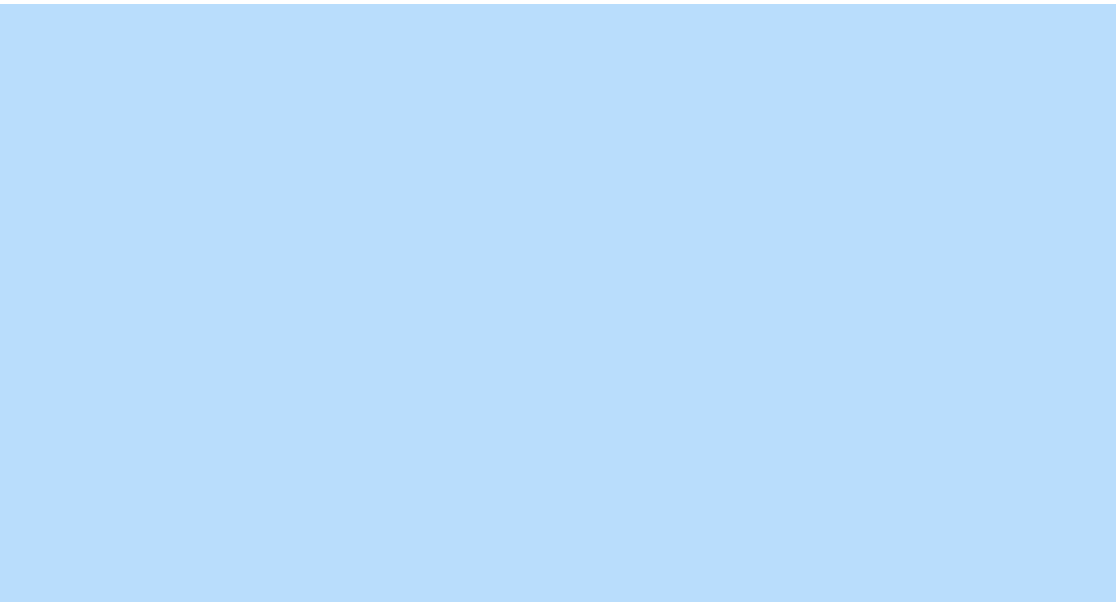
Regional Public Health Nurse	Kerry Dunnell	01/01/25	06/30/25
Regional Public Health Nurse	Kerry Dunnell	12/01/24	06/30/25
Regional Public Health Nurse	Kerry Dunnell	10/01/24	06/30/25
Regional Public Health Nurse	Kerry Dunnell	12/01/24	06/30/25





Regional Environmental Health Agent	Sam Menard	09/01/24	12/30/24
Sam Menard	Regional Environmental Health Agent	10/01/24	06/30/25
Sam Menard	Regional Environmental Health Agent	01/01/25	02/28/25
Sam Menard	Regional Environmental Health Agent	07/01/24	06/30/25





Regional Environmental Health Inspector	Sam Menard	09/01/24	02/28/25
Regional Environmental Health Inspector	Administrative Specialist	10/01/24	02/28/25
Regional Environmental Health Inspector	Administrative Specialist	10/01/24	02/28/25
Regional Environmental Health Inspector	Administrative Specialist	04/15/24	06/30/25
Kerry Dunnell	Sam Menard	10/01/24	06/30/25

Incomplete

Complete

Complete

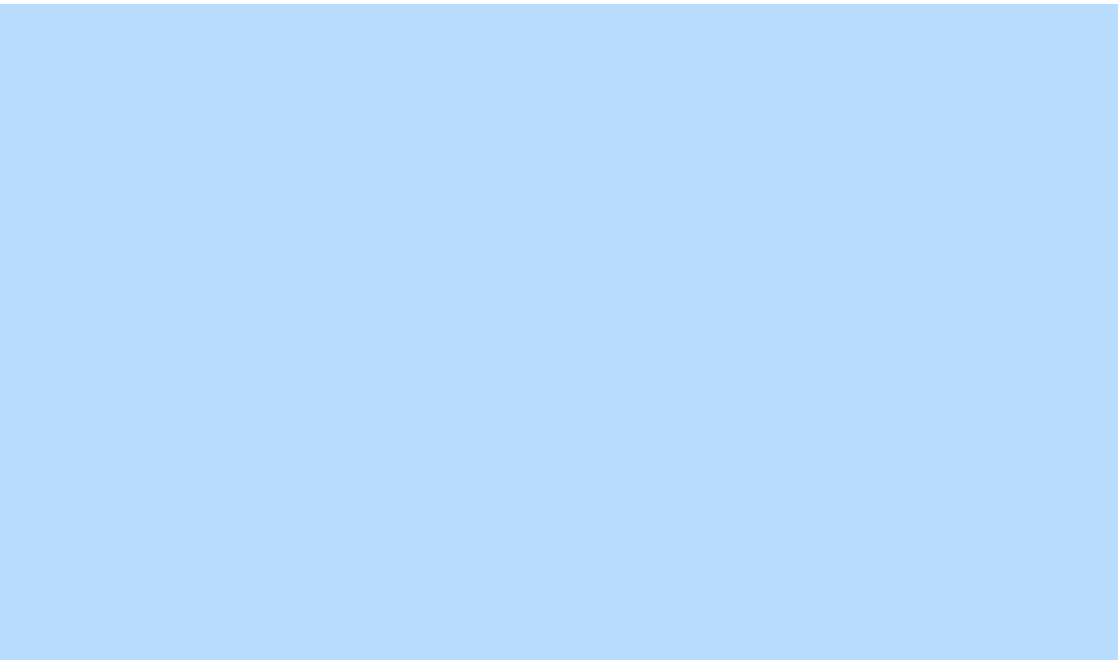
Complete

Complete	Charles River Public Health District meets monthly, alternating between in person & virtual meetings.
Complete	
Complete	
Complete	Program manager confirms monthly with each community. Regional Public Health nurse will assume this responsibility during TriTerm 2. All communities currently have 100% continuous coverage.
Not Started	To be completed in Trimesters 2 & 3
Complete	
Complete	
Complete	
Complete	
Complete	
Complete	

Complete	
Not Started	
In Progress	Program manager has introduced topic of Foundational Public Health services and provided graphics and information sources. Additionally, the Charles River collaborative engaged a consultant to conduct a fee cost study for existing services. These activities provide some preparation for the work of the upcoming FPHS assessment.
Not Started	
In Progress	Charles River staff have developed an inventory spreadsheet for all purchases and a checklist and preliminary procedure for quarterly inventory checks. Items above a dollar value of \$100 will have bar codes affixed to enable identification and tracking. This inventory system will be tested and demonstrated to the Advisory Board in TriTerm 2.
Complete	All purchases are made centrally by our administrative coordinator. Each purchase is itemized and details are used for the inventory mechanism.
Not Started	Training will occur during Triterm 2, after system is tested.
Not Started	System includes a quarterly audit checklist and process. Work with this will be ongoing.

Not Started	A Request for Quotes was developed for a strategic planning proposal. Vendors to be identified in November/early December 2024.
Not Started	This is part of the scope of work described in the RFQ
Not Started	Once complete, results will be presented to each Board of Health
In Progress	Regional Health inspector is including this information request as part of the Self-Assessment work being done by each community.

In Progress	Self Assessments should be complete early in TriTerm 2.
In Progress	We are continuing to encourage communities to reach out on demand for support. Staff have discussed creating a procedure, yet want to avoid creating barriers to engagement with communities.
In Progress	Shared services staff are all employees of Town of Needham and supervised internally. Agreements as to what services are being provided are made with each community based upon requests.
In Progress	Staff have been using and updating hiring and onboarding process tools. Final tools projected to be complete end of February 2025.
In Progress	Charles River has developed a hiring and on boarding process and continually reviews and adjusts those based upon position as well as upon reflection and feedback from Town of Needham Human Resources, staff, and Advisory Board members. Town of Needham hiring system enables deidentified review of all applications - striking name, employers, schools, etc. If a candidate is deemed potentially qualified, then their information can be 'unmasked'. This practice enables a 'blind review.'



Not Started	Regional Public Health Nurse first day was October 21, 2024. Following onboarding and training, this work is priority.
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In Progress

All communities are completing the Self-Assessment tool with assistance from Regional Health Inspector

In Progress

On going. Charles River PHD staff discuss potential training needs and opportunities at regular staff meetings.

Not Started

A system to gather feedback on training opportunities will be developed.

In Progress

Ongoing. Charles River PHD staff and communities have each requested opportunities for tagalong & cross training. CRPHD staff provide a monthly summary of numbers of activities in each community.

Stalled	Pending completion of Self Assessment Tool. A spreadsheet of all staff in shared services and community has been created and will be populated with requirements during TriTerm2. A meeting with the Advisory Board in TriTerm2 will include a presentation from the Training Hub and review of specific training needs.
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In Progress	All employees names and contact information were provided for initial upload into TRAIN. As new staff join either the collaborative or a community, each person is provided instructions for establishing a TRAIN account.
In Progress	Information about training requirements for each role has been provided to each community. A spreadsheet of all staff in shared services and community has been created and will be populated with requirements during TriTerm2. A meeting with the Advisory Board in TriTerm2 will include a presentation from the Training Hub and review of specific training needs.

Row 27 can we change dates and assigned staff?

Kerry Dunnell

11/17/24 3:50 PM

Dark Blue
Light Blue
Yellow
Grey
White
Red

Locked Rows

SSA Data Entry Fields

Pre-filled text from workplans/budgets

Intentionally blank space/hidden columns

Consistent text across all workplans

PC Data Entry only