



# 2015 Annual Report

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## Office of Policy and Practice Alignment



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# Message from the Director

## To Our Public Health Partners in Wisconsin,

I am pleased to present the 2015 Department of Health Services (DHS), Division of Public Health (DPH), Office of Policy and Practice Alignment (OPPA) Annual Report. The year 2015 was a year of growth and movement; we were also able to fill two key positions in OPPA, Dawn Mumaw as the Southeast Regional Director and Melanie (Mimi) Johnson, the State Health Plan Director. I would like to acknowledge both Angela Nimsgern (Northern Regional Director) and David Pluymer (Southern Regional Director) for helping to fill the void in the Southeastern Region during the vacancy there. Additionally, we were able to reorganize the Minority Health Program so that we could position the program to focus on analysis and resource development internally and externally with our partners throughout the state. I would like to thank the entire OPPA team because we could not have contributed to making great health departments better without this awesome team.



Tasha Jenkins  
Director, OPPA

Sincerely,

**Tasha Jenkins**, Director  
Office of Policy and Practice Alignment  
Division of Public Health



*OPPA Staff Retreat in Rhinelander, July 2015*

## OPPA Overview

### OPPA Purpose, Mission, and Vision

“To provide leadership and build cohesion for a strong state public health system of partners working in all communities and at all levels to advance health promotion and protect against health threats in Wisconsin” is the mission OPPA strives to achieve. OPPA’s primary responsibility is to build partnerships and to provide leadership and support through the development and recommendations of statewide policy related to the Wisconsin Public Health System.

**“Adopting,  
promoting, and  
implementing  
culturally and  
linguistically  
appropriate  
services.”  
-Minority  
Health Program**

#### Minority Health Program

The Minority Health Program provides statewide leadership for policy measures that aim to improve the health of vulnerable populations in Wisconsin. It assures coordination of efforts intended to reduce health disparities. We work to consolidate these three levels of mandate into a coherent plan of action that our partners can implement to improve health outcomes for minority communities. The program provides the administration of community grants, the minority public health information campaign, publication of the Minority Health Report, and administrative support to the Minority Health Leadership Council. Visit the Minority Health Program section of the DHS website: <https://www.dhs.wisconsin.gov/minority-health/index.htm>.

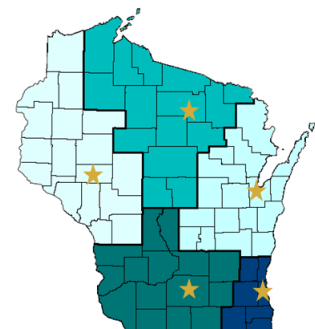


#### Regional OPPA Teams

The regional offices of DPH function as information pipelines through which central office and local public health departments communicate. Each regional office is comprised of a team that provides leadership and builds cohesion for a strong state public health system. They provide technical assistance and consultation for community health assessments, community health improvement plans, strategic plans, performance management plans, and quality improvement.

Regional OPPA teams also provide grant management for the Preventive Health and Health Services Block Grant, lead the DHS Administrative Rule Chapter 140 reviews, lead the state survey of local health departments, and maintain situational awareness of regional public health issues,

Visit the Regional Team section of the DHS website: <https://www.dhs.wisconsin.gov/dph/regions.htm>.



Policy Section

The Policy Section is engaged in developing and tracking the State Health Plan (Healthiest Wisconsin 2020); addressing health disparities; encouraging the use of evidence-based practices to promote health equity; promoting a sufficient, competent, and diverse public health workforce; facilitating partnerships, building coalitions, and leading systematic state level planning to improve the health of all jurisdictions. Visit the Policy Section of the DHS website: <https://www.dhs.wisconsin.gov/hw2020/wi-hipp.htm>.

Also housed within the Policy Section is the [Primary Care Program](#) (PCP). The PCP administers a number of approaches intended to meet the needs of medically underserved communities, including: (1) the Primary Care Cooperative Agreement, an annual grant from the Health Resources and Services Administration (HRSA), which is used to coordinate resources and improve primary care service delivery to the underserved; (2) the Health Professional Shortage Areas (HPSA) designation program, which documents significant shortages of primary care, dental, or mental health providers in rural or urban service areas; (3) the federal National Health Service Corps (NHSC) program, which provides loan repayment plans for primary care providers working in underserved communities; and (4) the J-1 Visa Waiver program, which provides incentives for graduates of foreign medical schools seeking immigrant status to work in underserved communities in exchange for a waiver of the requirement to return to their home country for two years prior to applying for immigrant status.



Connection to Division of Public Health (DPH) Strategic Plan

This report is based on the DPH Strategic Goals. OPPA has identified strategies within our scope that advance DPH achievement of these goals. OPPA staff uphold the values of DPH: passion, teamwork, credibility, and discernment. Progress related to those strategies is included.



# Goal I: Provide Public Health Leadership

*“As a Planning Team member, my responsibility will be to communicate support and “cheer lead” the final plan with my members or constituents, and, perhaps, other groups.”*  
-Quote from WI-HIPP Steering Committee Member

## Strategy 1: Strengthen the Capacity and Competencies of Local and Tribal Health Departments (LTHDs) with Consistency and Accountability

- The Regional Office staff conducted a spring and fall orientation and training session to assure new and aspiring public health professionals have knowledge of the Wisconsin public health system, statutes, core functions, and essential services to new and aspiring public health professionals.
- Regional Office staff also collaborated with Wisconsin Association of Local Health Departments and Boards (WALHDAB) to provide New Local Health Officer (LHO) Orientation, and met individually with new LHOs to address specific needs.
- Regional Office staff assisted with planning the Board of Health breakout workshops at the 2015 Wisconsin Public Health Association/WALHDAB annual conference.

### Supports HW 2020 Infrastructure Focus Area:

- Diverse, Sufficient, and Competent Workforce that Promotes and Protects Health
- Public Health Capacity and Quality

## Strategy 2: Coordinate the Development and Implementation of the Wisconsin Health Assessment and Health Improvement Plan

- The Wisconsin Health Improvement Planning Process (WI-HIPP) is the method through which Wisconsin is developing its five-year state health improvement plan. The process also aids DHS in preparing for accreditation through the Public Health Accreditation Board (PHAB).
- During 2015, WI-HIPP staff convened a steering committee comprising diverse partners from across sectors to recommend health priorities for Wisconsin. Partners included state agencies, local health departments, faith communities, community-based organizations, minority community leaders, health professional organizations and boards, community health centers, and health education organizations.
- Prioritization criteria were drawn from *HW2020*, the State Innovation Model (SIM) program, Governor’s Public Health Council, and the Centers for Disease Control and Prevention, as well as mortality and morbidity data from the Office of Health Informatics and priorities from local health departments.
- A data work group, comprising internal and external subject matter experts (SMEs), used the framework of the prioritization criteria to collect and analyze targeted data to further inform the selection of priorities. Internal SMEs gathered data from their programs and shared them with external subject matter experts to review. These external partners included SMEs from the academic and community sectors.
- A communications work group, led by the DHS Secretary’s Office, developed strategic messaging to inform internal and external stakeholders about the processes as they moved forward.

### Supports HW 2020 Infrastructure Focus Area:

- Collaborative Partnerships for Community Health Improvement

## Goal I: Provide Public Health Leadership

### Strategy 3: Assure the Development of a Sufficient, Diverse, and Competent Public Health Workforce

- The PCP promoted the National Health Service Corps and other incentive programs that promote working in medically underserved areas to undergraduates and racial/ethnic minority students.
- DPH staff conducted orientation and training sessions to assure new and aspiring public health professionals have knowledge of the Wisconsin public health system, statutes, core functions, and essential services to new and aspiring public health professionals.
- OPPA mentored several Area Health Education Center (AHEC) interns as well as serving on two regional AHEC boards of directors. OPPA also was fortunate to host two UW Population Health Fellows for two-year fellowships.
- OPPA facilitated the recruitment for public health professionals to participate in the MidAmerica Public Health Leadership Institute (MARPHLI).
- All OPPA staff completed the PH Competency Assessment to identify internal workforce development needs.

**Supports HW 2020 Infrastructure Focus Area:**  
Collaborative Partnerships for Community Health Improvement

### Strategy 4: Strengthen the Network of Primary Care Providers in Health Shortage Areas in Wisconsin

- The PCP worked to complete health professional shortage area surveys. Surveys were completed for 25% of the state in the mental health discipline shortage areas and 50% of the state in the primary care discipline shortage areas.
- The impact of working in the health professional shortage areas assured retention of HPSAs across the state, leading to 125 providers receiving loan repayment funding totaling \$3,604,796.
- The PCP completed presentations to health professions training programs, reaching approximately 200 students during six events.

**Supports HW 2020 Infrastructure Focus Area:**  
Public Health Capacity and Quality

### Strategy 5: Support Internal and External Public Health Accreditation Efforts

- The Wisconsin Public Health Improvement Initiative (WPHII), a five-year, 4.7 million dollar grant from CDC, came to an end in 2015. Regional OPPA staff, using National Public Health Performance Standards, assisted in goal implementation of this grant by providing leadership, technical assistance, and skill development related to strategic planning, quality improvement, and public health accreditation preparation to local and tribal health departments as well as internally within the Division of Public Health.
- WPHII supported OPPA staff to assist with accreditation site visit preparation for several local health departments and supported tribal and local accreditation mentoring and training forums.
- OPPA staff also consulted and committed resources to the Wisconsin DPH pursuit of accreditation.
- The Health Equity Community of Practice (HE CoP) rolled out large-group trainings in January 2015. The HE CoP consisted of professionals, informally linked with one another to grow in knowledge and expertise, to collaboratively pursue solutions to the issue of disparate health outcomes in our state. The two-part CoP consisted of a Core Team of Health Equity Champions from across DPH that lead the direction of the CoP, and offer training sessions open to DPH staff, DHS staff, and at times our external partners.

**Supports HW 2020 Infrastructure Focus Area:**  
Public Health Capacity and Quality

*“As a new health officer I feel I can always outreach any member of my team for guidance.”*  
-Quote from Satisfaction Survey

## Goal 2: Forge and Strengthen Key Partnerships

*“Our regional office is essential to our local health department re: supporting our work and providing a communication link.”*  
-Quote from Satisfaction Survey

### Strategy 1: Strengthen Linkages between Physicians and Primary Care Settings In HPSA Designations In Wisconsin

- The PCP convened the Wisconsin Council on Medical Education and Workforce to promote the Nurse Corps.
- PCP staff participated in the National Governor’s Association Health Workforce Policy Academy. The NGA Health Workforce plan included a focus on HPSA designation data.
- The PCP continued its collaboration with the Rural Health Development Council and the Wisconsin Council on Medical Education and Workforce (WCMEW). The WCMEW assisted in sharing the Primary Care program information with their networks to help further the initiative.

#### Supports HW 2020 Infrastructure Focus Area:

- Access to High-Quality Health Services
- Systems to Manage and Share Health Information and Knowledge

### Strategy 2: Facilitate Information Exchange with Nonprofit Entities Working With Volunteers Providing Health Care Services

- The PCP launched the Volunteer Health Care Program online database. This online system, coupled with additional technical assistance from program staff, has helped nearly 60 agencies and over 1,700 providers become registered in the database. These agencies and providers have seen over 28,000 patients and provided over 67,000 patient visits.
- The PCP provided webinars, presentations, and technical assistance to over 30 nonprofit entities.

#### Supports HW 2020 Infrastructure Focus Area:

- Systems to Manage and Share Health Information and Knowledge
- Collaborative Partnerships for Community Health Improvement
- Access to Health Services

### Strategy 3: Link and Assure the Division’s Relationships with Local and Tribal Health Departments and Other Public Health Partners

- OPPA staff provided representation and leadership assuring DHS and DPH policies, initiatives, and priorities are consistently communicated to local public health system partners as well as assuring unique system and population needs in regions are identified and communicated through engagement to collaborative groups supporting state, local, and tribal health departments and the public health system partners.
- Regional OPPA staff provided internal connection with DHS Tribal Affairs Office to DPH.
- Regional OPPA supported Regional Wisconsin Association of Local Health Departments and Boards meetings to share resources, updates, and solicit feedback from local and tribal health departments.
- Minority Health Program staff offered 10 health equity trainings to external partners.

#### Supports HW 2020 Infrastructure Focus Area:

- Collaborative Partnerships for Community Health Improvement
- Public Health Capacity and Quality



## Goal 2: Forge and Strengthen Key Partnerships

### Strategy 4: Coordinate and Facilitate Communities of Practice with Public Health Partners

In total, 10 Communities of Practice (CoP) were held by Regional OPPA staff across the state in order to continue the development of Foundational Public Health Capabilities at the local and tribal levels. Agencies that participated had the opportunity to increase awareness, knowledge, and skills related to National Public Health Performance Standards, evidence-based practice, and best practice.

#### Supports HW 2020 Infrastructure Focus Area:

- Collaborative Partnerships for Community Health Improvement;
- Public Health Capacity and Quality

### Strategy 5: Promote and Strengthen Relationships within OPPA and DPH

- The PCP began conversations with the Northeast (NE) Regional Office related to program partnership, which led to the development of drafted language for the NE region to use in promoting incentive programs to contacts in their region.
- The PCP worked with the regional offices to promote Nurse Corps.
- Lean projects across DPH included OPPA staff,.
- OPPA staff participated in Maternal and Child Health Advisory Committee as well as Chronic Disease Partnership.
- Regional OPPA assisted other DPH bureaus/offices with strategic planning.
- OPPA initiated connections with OHI for local data support.

#### Supports HW 2020 Infrastructure Focus Area:

- Public Health Capacity and Quality
- Collaborative Partnerships for Community Health Improvement

### Strategy 6: Strengthen Partnership Efforts to Address Racial and Ethnic Disparity Issues within the Division

- The PCP worked with the Minority Health and Refugee Health programs on resettlement issues in Milwaukee, by promoting the need for additional health care sites to be involved medical homes for refugees.
- The Minority Health Program successfully applied for its third consecutive grant through the federal Office of Minority Health's State Partnership Initiative to Address Health Disparities. The project, the Wisconsin Minority Health HIV Partnership Initiative, is a partnership between the MHP and the AIDS/HIV Program, which aims to reduce the disparity in HIV/AIDS cases among Black, Latino, and Native American communities in Milwaukee. The project will build on the foundational work of culturally and linguistically appropriate services (CLAS) and aims to increase the availability of CLAS for minority populations at risk for HIV in Milwaukee.
- Regional OPPA staff serve as the liaison to the DHS Tribal Affairs Office. In this role, OPPA staff also relayed to TAO information about DPH staff meetings with tribal health departments, assisted DPH staff in contacting tribal health staff and preparing communications to tribal health leadership and staff. Staff worked to assure the Tribal Affairs Office (TAO) was informed of public health awards and recognitions conveyed to Wisconsin tribes such as the Robert Wood Johnson Culture of Health Prize awarded to the Lac du Flambeau and Menomonee communities.

#### Supports HW 2020 Infrastructure Focus Area:

- Diverse, Sufficient and Competent Workforce that Promotes and Protects Health

***“The HIV/ Minority Health five-year federal grant demonstrates the MHP’s collaborative leadership both in DPH and at the National level.”  
– MHP Staff***

## Goal 3: Promote Informed Decisions

### Strategy 1: Increase Capacity to Implement CLAS Standards within the Division

**“Building partnerships, strengthening workforce, improving access to quality healthcare”**  
-Quote from PCP Staff

- The National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS) comprise a framework through which health organizations can advance and sustain health equity. DPH worked to implement the Standards throughout 2015.
- DPH’s HE CoP provided staff and partners five learning opportunities related to implementing CLAS, focusing on language access plans and health literacy interventions. The process increased staff and partner awareness of health equity and methods for advancing health equity through policy and interventions.
- As a result of participation in the HE CoP, two members of the core team convened bureau-level communities of practice to support and increase awareness of health equity in their bureaus. The Bureau of Environmental and Occupational Health focused on health literacy through plain language and culturally appropriate languages (translations) in their communications. The Bureau of Community Health Promotion focused on training in cultural competency related to essential services in public health.
- Minority Health and Prevention grants supported community engagement to validate health equity data collected during the Healthiest Wisconsin 2020 midcourse review.
- The Minority Health Officer engaged in activities to draft a language access plan and language access guidelines for DPH.
- The Minority Health Program maintained its CLAS web page to disseminate resources on implementing the Standards, and petition formal commitments from partners through the CLAS pledge form.

#### Supports HW 2020 Infrastructure Focus Area:

- Health Literacy
- Public Health Capacity and Quality
- Establish Resources for Governmental Infrastructure

### Strategy 2: Provide Regular, Timely, and Effective Communication between DPH and External Public Health Partners

- The PCP shares information via email updates to partners as necessary to promote application deadlines and program and policy changes.
- The PCP developed information sheets for the VHCP, NHSC, FQHCs and Conrad 30 program contacts to assist with increased communication of these programs.
- Monthly OPPA Update newsletters were sent to local health departments and key DPH staff to assist in keeping all up to date on important issues and items.
- The OPPA Director met on a regular basis with WALHDAB leadership and facilitated the State, Local Operations Team (SLOT) meetings, with regional directors in attendance.
- OPPA staff served on many state committees representing DPH to stay informed of initiatives and then communicated this information to local and state partners. A few examples include: WPHRN Steering Committee, County Health Rankings State Team, Community Health Improvement in Action (CHIA) Advisory Committee, and Area Health Education Center boards.

#### Supports HW 2020 Infrastructure Focus Area:

- Collaborative Partnerships for Community Health Improvement

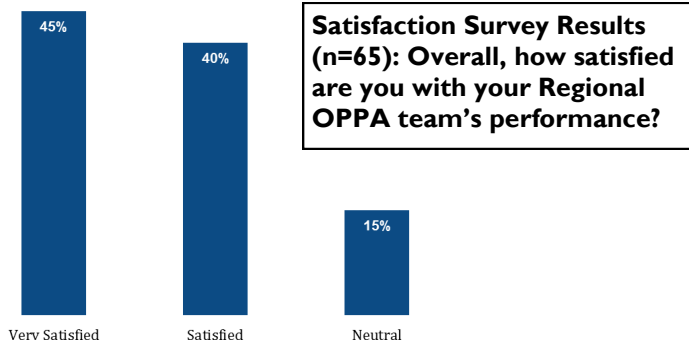
## Goal 3: Promote Informed Decisions

### Strategy 3: Inform Public Health Policy and Practice with Our External Partners through Consulting and Conducting Surveys

- The PCP joined the Practice Sights state collaborative to survey National Health Service Corps providers and began researching how other states survey/monitor their Conrad 30 recipients. Future research and program implementation will allow the PCP to monitor up to 30 Conrad 30 program physicians each year to assess retention factors; via Practice Sights, the PCP will be able to survey both NHSC providers and site administrators to gain perspective on intentions to continue practicing in underserved areas. Preliminary results from the focus groups will be provided to inform the State Health Assessment in early 2016.
- The final focus groups were held as part of the Health Equity Check-In, a series of community-led focus groups conducted throughout Wisconsin with individuals from diverse backgrounds based on race/ethnicity, socioeconomic status, geography, sexual orientation, and disability status. The check-in is an evaluation of the results of the Healthiest Wisconsin 2020 Baseline and Health Disparities Report, released in 2014, which revealed widespread health disparities throughout Wisconsin. In total, 26 focus groups were conducted around the state and included representation from the following communities: African American, Latino, Hmong, American Indian (both in urban and tribal areas), LGBT, rural, and disability.
- OPPA completed the 2015 Satisfaction Survey and 2014 Annual Report to assure strong workforce and business practices within OPPA.

#### Supports HW 2020 Infrastructure Focus Area:

- Public Health Capacity and Quality
- Public Health Research and Evaluation



### Strategy 4: Improve Data Collection, Accessibility, Utilization, Analysis, and Dissemination among Public Health Partners

- The PCP and the Primary Care Association (PCA) started transitioning their paper survey process to an electronic process, which allowed for a decrease in process time by 50%. The PCP and PCA expect to have surveys completed for the entire state in all disciplines in accordance with an October 2016 impact analysis deadline from Health Resources Service Administration.
- OPPA supported the Community Commons pilot and registered for data collaboration opportunities. Regional OPPA staff assisted several local health departments with data collection for their Community Health Assessments.

#### Supports HW 2020 Infrastructure Focus Area:

- Systems to Manage and Share Health Information and Knowledge

## Goal 4: Assure Strong Workforce and Business Practices

*“As the Health Officer, I felt the 140 preparation and onsite review was thorough and professional.”*  
-Quote from Satisfaction Survey

### Strategy 1: Strengthen Governmental Public Health Practices through a Coordinated Approach to DHS Chapter 140 Audit Reviews

- Twenty reviews of LHDs were conducted by Regional OPPA staff, according to Wis. Admin. Code ch. DHS 140 to assure consistent and accountable public health services in local government.
- In total, three Level I, 12 Level II, and five Level III audit reviews were conducted.
- All local health departments reviewed in 2015 provided a minimum set of public health services and met required state statutes and rules.

#### Supports HW 2020 Infrastructure Focus Area:

- Public Health Capacity and Quality
- Access to High-Quality Health Services

### Strategy 2: Provide Contract Monitoring and Support for Grantees Funded through OPPA

- Regional OPPA staff provide contract monitoring and support for the Preventive Health and Health Services Block Grant (PHHS BG). These funds are distributed to partner agencies in order to provide leadership and support for the continuing development of Foundational Public Health Capabilities at the local and tribal levels.
- The 2016 Minority Health Community Grantees were selected: Gerald L. Ignace Indian Health Center (smoking cessation); Hmong American Friendship Association (Medical Interpretation and Translation Services for the Southeast Asian Community); Racine | Kenosha Community Action Agency (Father Involvement to Improve Health Outcomes in African American and Hispanic WIC Families); Wisconsin Literacy, Inc. (Let's Talk About Medicines).
- The Minority Health Public Health Information Campaign (PHIC) funds supported community engagement projects led by the Great Lakes Intertribal Council (GLITC). Funds were also disbursed to String Systems to support men's health awareness activities in the African American community.
- The PCP provided contract monitoring to the Wisconsin Primary Health Care Association as well as to 17 federally qualified health centers.

#### Supports HW 2020 Infrastructure Focus Area:

- Equitable, Adequate and Stable Public Health Funding

## Goal 4: Assure Strong Workforce and Business Practices

### Strategy 3: Communicate and Interpret Applicable Public Health Statutes and Rules with Our External Partners

- Regional OPPA staff strived to respond to questions and concerns related to required public health services, public health nursing practice, programs and policies, board, staffing, state statutes, and administrative rules in a consistent and timely manner.
- Local health departments received focused technical assistance and consultation in restructuring their local agencies, leading to two counties combining management of their public health and human service functions without jeopardizing their compliance with statutes and rules.
- State statute/administrative rule references were revised for structuring a multicounty health department.
- Two additional agencies received consultation on requirements for local medical directors, and nursing services structure.
- OPPA staff reviewed qualifications of candidates for six local health officer vacancies.
- Regional OPPA staff began serving in a lead role for the review and potential revision of Administrative Rules DHS 139 and DHS 140 with partner agency representatives.

**Supports HW 2020 Infrastructure Focus Area:**  
Public Health Capacity and Quality

*“We (regional OPPA) are happy to be able to serve as a resource to assure programs and services are implemented appropriately.”*  
*-Regional Director quote*

### Strategy 4: Complete and Disseminate an OPPA Work Plan, Strategic Plan, Quality Improvement Plan, Performance Management Plan, and Annual Report

- The DPH Strategic Plan was used as the driver behind the OPPA Strategic Plan.
- The OPPA Strategic Plan in turn guided internal work plans and related performance management plans of each regional office or program.
- Gaps in accomplishment, identified through performance management targets, informed the Quality Improvement Plan.
- OPPA work plans were developed and implemented for 2015 and the 2014 Annual Report was distributed.
- OPPA is looking forward to more robust documents in 2016 to ensure internal and external awareness and accountability of our work.

**Supports HW 2020 Infrastructure Focus Area:**  
Public Health Capacity and Quality



## More to Come in 2016

### OPPA Staff Involvement

In 2016, OPPO staff involvement in workgroups, boards, committees and councils:

- Wisconsin Public Health Association (WPHA) Executive Committee
- South Central and Northern Highlands Area Health Education Center Boards
- Wisconsin Public Health Research Network Steering Committee
- Wisconsin Public Health Association Annual Conference and Public Health Nurse Conference Planning
- Preventive Health and Health Services Block Grant CDC evaluation work group
- DPH Data Management Workgroup, domain teams, Workforce Development group
- Vital Records Report Advisory Team

### Policy Section

In 2016, the Policy Section will:

- Select health priority areas with input from community members.
- Track outreach related to WI-HIPP.

### Minority Health

In 2016, the Minority Health Program will:

- Validate data and results from the Health Equity Check-In focus groups to communities before the final results are shared.
- Establish partnerships with agencies in Milwaukee to plan events celebrating HIV/AIDS awareness days in 2016. To date, five partnerships have been established.

### Regional OPPO Teams

In 2016, regional OPPO staff will:

- Conduct a satisfaction survey.
- Create an annual report.
- Develop policies and procedures for consistent communication on and interpretation of applicable state statute and administrative rule.
- Serve in a lead role for the review and potential revision of Administrative Rules DHS 139 and DHS 140 with partner agency representatives.
- Conduct a quality improvement project to enhance the 140 Audit Reviews.
- Develop a Regional OPPO Performance Management Plan.

*“With our new OPPO structure and team members, 2015 was a year of growth and development. We are excited about where we are heading with implementation of performance management and quality improvement into our work.”*

*-Regional Director quote*

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ORIENTATION 140 REVIEW LINK TO DHS  
 ORIENTATION Academic Partnerships  
 ORIENTATION 140 Review  
 ESSENTIAL PH SERVICES  
 HEALTHIEST WI 2020 LINK TO DHS ASSURE ACCESS  
 STATUTE AND RULE 140 REVIEW  
 VOLUNTEER LIABILITY COVERAGE  
 Essential PH Services  
 Facilitate Partnerships CHA  
 CHA Accreditation Readiness CHIP  
 CHA Academic Partnerships  
 CHIP Workforce Development  
 Accreditation Readiness  
 Community Of Practice CHA  
 Collaborative Teams Primary Care CHIP  
 HEALTH PRIORITY SHORTAGE AREAS  
 CHIP ADDRESS DISPARITIES  
 Promote Equity Policy Development  
 Workforce Development  
 ORIENTATION ASSURE ACCESS COMMUNITY OF PRACTICE  
 COLLABORATIVE TEAMS  
 VOLUNTEER LIABILITY COVERAGE

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