



**Collaborative Strategic
and Action Plans**
2007-2010

Adopted: July 11, 2007

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Get the Lead Out!

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Get the Lead Out!

Introduction to 2007-2010 Strategic Plan

The 2002 and revised 2003 *Get the Lead Out!* strategic plans were instrumental in building the *Get the Lead Out!* Collaborative, greatly increasing local capacity to combat childhood lead poisoning, and leading the community to greatly reduced levels of childhood lead poisoning in 2006 (58% fewer children lead poisoned in 2006 than in 2001). This 2007-2010 Strategic Plan responds to key lessons learned during the Collaborative's first five years of coordinated action. Furthermore, through the collection of evidence, experience and data during the first five years, this plan has been able to proactively respond to an ever-evolving environment.

Federal and State Planning is seeking elimination of childhood lead poisoning by the year 2010 (less than 0.5% incidence in any community). Current data suggests that this goal may be achievable in both the City of Grand Rapids and Kent County, *but not without a strategic, concerted effort*. This plan sets forth the needed action steps to make elimination a reality in Kent County.

To develop the 2007-2010 plan, Marylu Dykstra, Principal of Sirius Resources LLC, facilitated a November 17, 2006 work session. Outcomes from that work session were further crafted by *Get the Lead Out!* standing committees and special work groups under the facilitation of Paul Haan, Healthy Homes Coalition of West Michigan Project Coordinator.

Strategic elements from the two previous plans were strong and needed no significant revision. The only change was the deletion of a pilot evaluation goal and the addition of a sustainability goal.

This plan was adopted by the *Get the Lead Out!* Collaborative at their July 11, 2007 meeting.



Paul Haan
Project Coordinator
July 2007



Get the Lead Out!

Strategic Plan

Vision Statement

To end lead poisoning among children in Kent County.

Mission Statement

To bring the community together in strategic action to end childhood lead poisoning in Kent County.

Goals

1. Children's homes are lead safe.
2. The community understands the causes of childhood lead poisoning and how to protect our children.
3. Community leaders make decisions that protect children from lead poisoning.
4. All children 0–5 years of age are assessed for lead risk and receive appropriate testing and treatment.
5. *Get the Lead Out!* activities are financially sustainable through 2010.

Values

The following values are guiding principles for the *Get the Lead Out!* Collaborative:

- Collaboration.
- Honesty and integrity.
- Creativity.
- Accountability.
- Decision-making by consensus.
- Using data to make decisions.
- Continuous learning.
- Diversity.
- Involvement of neighborhood residents as participants and leaders.
- Sensitivity to the needs of our partners.
- Resource sharing.
- The furtherance of justice.
- The wellbeing and safety of our children.
- The protection of our environment.
- Actions that end childhood lead poisoning.



Get the Lead Out!

Action Plan

GOAL 1 - Children's homes are lead safe.

- STRATEGY 1.1 - Continue remediation through a lead hazard control home repair program.
- STRATEGY 1.2 - Increase knowledge of specific hazards in housing through sampling and testing.
- STRATEGY 1.3 - Promote lead-safe housing as a desirable condition.
- STRATEGY 1.4 - Provide education on interim controls and Lead-Safe Work Practices (LSWP).
- STRATEGY 1.5 - Secure passage of state tax credit legislation.

GOAL 2 - The community understands the causes of childhood lead poisoning and how to protect our children.

- STRATEGY 2.1 - Provide educational resources to parents of young children that promote awareness, knowledge and understanding and lead to action that lowers the incidence of childhood lead poisoning in the community.
- STRATEGY 2.2 - Provide educational resources to paint and building supply retailers that promote awareness, knowledge and understanding and lead to action that lowers the incidence of childhood lead poisoning in the community.
- STRATEGY 2.3 - Provide educational resources to home-based childcare providers that promote awareness, knowledge and understanding and lead to action that lowers the incidence of childhood lead poisoning in the community.
- STRATEGY 2.4 - Provide educational resources to health and human service providers that promote awareness, knowledge and understanding and lead to action that lowers the incidence of childhood lead poisoning in the community.

GOAL 3 - Community leaders make decisions that protect children from lead poisoning.

- STRATEGY 3.1 - Develop messaging for annual legislative priorities to reduce childhood lead poisoning in greater Grand Rapids.
- STRATEGY 3.2 - Develop and maintain a base of supporting organizations and individuals.
- STRATEGY 3.3 - Participate in both proactive and reactive dialogue with elected officials and appointed policy makers to advance annual legislative priorities.

GOAL 4 - All children 0–5 years of age are assessed for lead risk and receive appropriate testing and treatment.

- STRATEGY 4.1 - Develop incentives and remove barriers to testing for parents of one and two year-old children residing in the City of Grand Rapids and other high-risk communities and environments.
- STRATEGY 4.2 - Ensure all clinics and primary care facilities in Kent County follow the MDCH screening and testing plan.
- STRATEGY 4.3 - Reduce racial and ethnic disparities with participation in blood lead testing.
- STRATEGY 4.4 - Provide follow-up services for children with blood lead levels above 5 µg/dL.

GOAL 5 - *Get the Lead Out!* activities are financially sustainable through 2010.

- STRATEGY 5.1 - Secure government funding contracts.
- STRATEGY 5.2 - Secure funding contracts with private philanthropy.
- STRATEGY 5.3 - Develop and promote a fee-for-service structure.
- STRATEGY 5.4 - Develop a major gifts donor program.
- STRATEGY 5.5 - Develop and promote a membership fee structure.

GOAL 1: Children's homes are lead safe.

STRATEGY 1.1: Continue remediation through a lead hazard control home repair program.

OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
<p>Objective 1.1.a: Continue fixing 200 homes/year through HUD LHC program Measure: Number of homes repaired.</p>	<p>December 2007 = 200 December 2008 = 200 December 2009 = 200 December 2010 = 200</p>	<p>City of Grand Rapids Housing Rehab Office</p>	<p>Home Repair Services Kent County Health Dept. Lighthouse Communities Rental Prop. Owners Assoc. Healthy Homes Coalition</p>
<p>Objective 1.1.b: Grow LHC program by securing an additional \$5 million by 2010 Measure: Number of dollars raised.</p>	<p>October 2007 = \$3 mil October 2008 = \$2 mil</p>	<p>City of Grand Rapids Housing Rehab Office</p>	<p>Home Repair Services Kent County Health Dept. Lighthouse Communities Rental Prop. Owners Assoc. Healthy Homes Coalition</p>
<p>Objective 1.1.c: Develop pool of quality contractors to 15 contractors (more good ones, fewer shoddy ones) Measure: Number of quality contractors.</p>	<p>June 2008</p>	<p>City of Grand Rapids Housing Rehab Office</p>	<p>MDCH Training Private trainers Business support orgs. Local contractors</p>

GOAL 1: Children's homes are lead safe.

STRATEGY 1.2: Increase knowledge of specific hazards in housing through sampling and testing.

OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
<p>Objective 1.2.a: Increase risk assessment activity in high-risk neighborhoods (>50% housing <1950) by 10% per year. Measure: Percentage of annual increase</p>	<p>Annually</p>	<p>Healthy Homes Coalition Hazard Reduction Committee</p>	<p>MDCH EPA GR Housing Rehab Office GR Housing Inspections Private Risk Assessors Home Repair Services Rental Prop. Owners Assoc.</p>
<p>Objective 1.2.b: Increase voluntary participation in dust sampling by offering a free or low-cost dust sampling to 200 households per year. Measure: Number of homes sampled.</p>	<p>December 2007 December 2008 December 2009 December 2010</p>	<p>Healthy Homes Coalition Hazard Reduction Committee</p>	<p>MDCH GR Lead Hazard Control Kent County Health Dept. Calvin College Home Repair Services</p>
<p>Objective 1.2.c: Conduct 50 risk assessments in conjunction with targeted activities (DIY repairs, paint sales, etc.) per year. Measure: Number of risk assessments</p>	<p>December 2008 December 2009 December 2010</p>	<p>Healthy Homes Coalition Home Repair Services Hazard Reduction Committee</p>	<p>Private Risk Assessors GR Housing Inspections Retailers</p>
<p>Objective 1.2.d: Conduct EBL investigations at all households with a child with a current BLL $\geq 10\mu\text{g/dL}$ by 2009. Measure: Percentage of EBL households with investigation.</p>	<p>June 2009</p>	<p>Kent County Health Dept. Hazard Reduction Committee</p>	<p>Healthy Homes Coalition MDCH</p>

GOAL 1: Children's homes are lead safe.

STRATEGY 1.3: Promote lead-safe housing as a desirable condition

OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
<p>Objective 1.3.a: Conduct marketing that results in landlords remediating properties and subsequently marketing them as lead-safe. Measure: Number of Kent County properties listed in the State and City's registries. Measure: Number of uses of RPOA "Lead-Clear" certification.</p>	<p>Beginning June 2008, then ongoing</p>	<p>Rental Prop. Owners Assoc.</p>	<p>Healthy Homes Coalition GR Lead Hazard Control GR Housing Inspections MDCH Media</p>
<p>Objective 1.3.b: Conduct marketing that results in tenants seeking lead-safe housing. Measure: Vacancy rate in lead-safe housing units in the city vs. overall city vacancy rate. Measure: Number of hits on the City's lead-safe housing website.</p>	<p>Beginning October 2007, then ongoing</p>	<p>Healthy Homes Coalition Outreach Committee</p>	<p>Hazard Reduction Committee GR Lead Hazard Control Kent County Health Dept. GR Urban League</p>
<p>Objective 1.3.c: Conduct marketing that results in owner occupants remediating their units with lead-safe work practices. Measure: Number of owner occupants applying for LHC funding. Measure: Number of owner occupants taking LSWP training or other formal training.</p>	<p>ongoing</p>	<p>Healthy Homes Coalition Hazard Reduction Committee</p>	<p>GR Lead Hazard Control Rental Prop. Owners Assoc. Home Repair Services Neighborhood Associations Housing Agencies Kent County Health Dept. Media</p>
<p>Objective 1.3.d: Educate 40 paint and building retailers, resulting in their businesses actively promoting lead-safe work products and practices. Measure: Number of retailers educated.</p>	<p>Thru December 2007 = 10 Thru December 2008 = 20 Thru December 2009 = 30 Thru December 2010 = 40</p>	<p>Calvin College Nursing GVSU Nursing Outreach Committee</p>	<p>Healthy Homes Coalition Home Repair Services EPA</p>

GOAL 1: Children's homes are lead safe.	STRATEGY 1.4: Provide education on interim controls and Lead-Safe Work Practices (LSWP)
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OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
Objective 1.4.a: Educate 250 owner occupants per year in lead-safe housekeeping. Measure: Number of owner occupants educated.	Thru December 2007 = 250 Thru December 2008 = 250 Thru December 2009 = 250 Thru December 2010 = 250	Home Repair Services CLEARCorps	Kent County Health Dept. GR Lead Hazard Control Calvin College Nursing GVSU Nursing Healthy Homes Coalition
Objective 1.4.b: Develop two additional educational modalities to reach additional families (i.e. what to rent, how to dust sample). Measure: Number of educational modalities developed.	July 2008	Healthy Homes Coalition Hazard Reduction Committee Outreach Committee	To be determined by topic
Objective: 1.4.c: Educate 150 landlords per year on topics of interest, resulting in remediation in their properties. Measure: Number of landlords educated.	Annually	Rental Prop. Owners Assoc.	Healthy Homes Coalition GR Housing Rehab Office Kent County Health Dept. EPA

GOAL 1: Children's homes are lead safe.	STRATEGY 1.5: Secure passage of state tax credit legislation.
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OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
Objective 1.5.a: Get state legislation passed. Measure: Number of bills passed	December 2008	Healthy Homes Coalition	MI Lead-Safe Partnership Rental Prop. Owners Assoc. Detroit Lead Partnership MI CLP Commission Local legislators

GOAL 2: The community understands the causes of childhood lead poisoning and how to protect our children.

STRATEGY 2.1: Provide educational resources to parents of young children that promote awareness, knowledge and understanding and lead to action that lowers the incidence of childhood lead poisoning in the community.

OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
<p>Objective 2.1.a: Educate parents about the importance of testing of their children. Measure: Percentage (target 20%) increase in the City of Grand Rapids in testing of 1 & 2 year olds per year.</p>	<p>Thru December 2007 = 4,600 Thru December 2008 = 5,290 Thru December 2009 = 6,090 Thru December 2010 = 7,000</p>	<p>Kent County Health Dept. Outreach Committee</p>	<p>Healthy Homes Coalition Health Plans Health providers Human Service providers Michigan Family Resources Community/Faith Orgs. Parents</p>
<p>Objective 2.1.b: Educate 260 parents in the use of LSWP. Measure: Number of parents educated.</p>	<p>Thru December 2007 = 50 Thru December 2008 = 60 Thru December 2009 = 70 Thru December 2010 = 80</p>	<p>Home Repair Services Hazard Reduction Committee</p>	<p>Healthy Homes Coalition GR Lead Hazard Control Kent County Health Dept. Community Organizations</p>
<p>Objective 2.1.c: Educate 100 parents in lead-safe apartment and home shopping. Measure: Number of parents educated.</p>	<p>Thru December 2007 = 10 Thru December 2008 = 20 Thru December 2009 = 30 Thru December 2010 = 40</p>	<p>Kent County Health Dept. Outreach Committee</p>	<p>Healthy Homes Coalition Hazard Reduction Committee GR Lead Hazard Control GR Urban League</p>
<p>Objective 2.1.d: Educate 250 parents per year in lead-safe housekeeping. Measure: Number of parents educated.</p>	<p>Thru December 2007 = 250 Thru December 2008 = 250 Thru December 2009 = 250 Thru December 2010 = 250</p>	<p>Home Repair Services CLEARCorps</p>	<p>Kent County Health Dept. Calvin College Nursing GVSU Nursing Healthy Homes Coalition</p>
<p>Objective 2.1.e: Educate 2,500 parents per year in the provision of nutrition that helps combat the absorption of lead into the bloodstream. Measure: Number of parents educated.</p>	<p>Thru December 2007 = 2,500 Thru December 2008 = 2,500 Thru December 2009 = 2,500 Thru December 2010 = 2,500</p>	<p>Kent County Health Dept. WIC</p>	<p>Outreach Committee</p>

<p>GOAL 2: The community understands the causes of childhood lead poisoning and how to protect our children.</p>	<p>STRATEGY 2.2: Provide educational resources to <u>paint and building supply retailers</u> that promote awareness, knowledge and understanding and lead to action that lowers the incidence of childhood lead poisoning in the community.</p>
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OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
<p>Objective 2.2.a: Educate 40 paint and building retailers, resulting in their businesses actively promoting lead-safe work products and practices. Measure: Number of retailers educated.</p>	<p>Thru December 2007 = 10 Thru December 2008 = 20 Thru December 2009 = 30 Thru December 2010 = 40</p>	<p>Calvin College Nursing GVSU Nursing</p>	<p>Healthy Homes Coalition Home Repair Services EPA</p>

<p>GOAL 2: The community understands the causes of childhood lead poisoning and how to protect our children.</p>	<p>STRATEGY 2.3: Provide educational resources to <u>home-based childcare providers</u> that promote awareness, knowledge and understanding and lead to action that lowers the incidence of childhood lead poisoning in the community.</p>
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OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
<p>Objective 2.3.a: Educate 50% of home-based childcare providers, resulting in improved lead safety in their childcare setting. Measure: Percentage of home-based childcare providers reached.</p>	<p>July 2008 = 25% July 2009 = 35% July 2010 = 50%</p>	<p>Healthy Homes Coalition Outreach Committee</p>	<p>Kent Regional 4-C Kent County Health Dept.</p>
<p>Objective 2.3.b: Educate 50% of home-based childcare providers, resulting in the provision of improved nutrition in their childcare setting. Measure: Percentage of home-based childcare providers reached.</p>	<p>July 2008 = 25% July 2009 = 35% July 2010 = 50%</p>	<p>Healthy Homes Coalition Outreach Committee</p>	<p>Kent Regional 4-C Kent County Health Dept.</p>

GOAL 2: The community understands the causes of childhood lead poisoning and how to protect our children.

STRATEGY 2.4: Provide educational resources to health and human service providers that promote awareness, knowledge and understanding and lead to action that lowers the incidence of childhood lead poisoning in the community.

OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
Objective 2.4.a: Educate health and human service providers resulting in their use of the MDCH screening tool. Measure: Number of health and human service providers educated.	Thru December 2007 = 50 Thru December 2008 = 50 Thru December 2009 = 50 Thru December 2010 = 50	Healthy Homes Coalition Outreach Committee	Michigan Family Resources Kent County Health Dept. MDCH
Objective 2.4.b: Educate health and human service providers resulting in follow-up venous draws for all elevated capillary tests within 3 months. Measure: Number of health and human service providers educated.	Thru December 2007 = 50 Thru December 2008 = 50 Thru December 2009 = 50 Thru December 2010 = 50	Healthy Homes Coalition Outreach Committee	Michigan Family Resources Kent County Health Dept. MDCH
Objective 2.4.c: Educate health and human service providers resulting in a developmental assessment and referral for all children with confirmed elevated blood lead levels. Measure: Number of health and human service providers educated.	Thru December 2007 = 50 Thru December 2008 = 50 Thru December 2009 = 50 Thru December 2010 = 50	Healthy Homes Coalition Outreach Committee	Michigan Family Resources Kent County Health Dept. MDCH
Objective 2.4.d: Educate health and human service providers resulting in universal anticipatory guidance regarding nutrition. Measure: Number of health and human service providers educated.	Thru December 2007 = 50 Thru December 2008 = 50 Thru December 2009 = 50 Thru December 2010 = 50	Healthy Homes Coalition Outreach Committee	Michigan Family Resources Kent County Health Dept. MDCH
Objective 2.4.e: Educate 75 nursing students per year. Measure: Number of nursing students educated.	Thru December 2007 = 75 Thru December 2008 = 75 Thru December 2009 = 75 Thru December 2010 = 75	Calvin College Nursing GVSU Nursing	Aquinas Nursing GRCC Nursing Healthy Homes Coalition Kent County Health Dept. MDCH Outreach Committee

GOAL 3: Community leaders make decisions that protect children from lead poisoning.

Strategy 3.1: Develop messaging for annual legislative priorities to reduce childhood lead poisoning in greater Grand Rapids.

OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
<p>Objective 3.1.a: Hold one annual legislative priority work session with members and key supporters to identify potential annual priorities. Measure: Number of work sessions held.</p>	<p>Annually in November</p>	<p>Healthy Homes Coalition</p>	<p>HHC Membership Greater GR CEHI MCMCH MLSP MDCH Advocacy Coalition for Young Children/Families Pastors/faith leaders Parents Foundations, supporters</p>
<p>Objective 3.1.b: Collaborative body approves annual priorities. Measure: Number of annual priorities approved.</p>	<p>Annually in January</p>	<p>Healthy Homes Coalition</p>	<p>HHC Membership</p>
<p>Objective 3.1.c: Publish annual priorities and supportive messaging and distribute as necessary. Measure: Number of venues for promoting annual priorities.</p>	<p>Annually in January</p>	<p>Healthy Homes Coalition</p>	<p>HHC Membership Greater GR CEHI MLSP MCMCH MNCEH MLHS Media</p>

GOAL 3: Community leaders make decisions that protect children from lead poisoning.

Strategy 3.2: Develop and maintain a base of supporting organizations and individuals.

OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
<p>Objective 3.2.a: Conduct an annual membership renewal and recruitment campaign, making contact with each member at least annually. Measure: Numbers of members renewed.</p>	<p>Annually in June</p>	<p>Healthy Homes Coalition</p>	<p>HHC Membership</p>
<p>Objective 3.2.b: Communicate advocacy opportunities to members through:</p> <ul style="list-style-type: none"> • Bi-monthly e-newsletters • Special alerts • Publishing tools on Healthy Homes Coalition website <p>Measure: Number of communication events.</p>	<p>Bimonthly</p>	<p>Healthy Homes Coalition</p>	<p>HHC Membership Greater GR CEHI MLSP MCMCH MNCEH MLHS Other MI lead coalitions Media</p>

GOAL 3: Community leaders make decisions that protect children from lead poisoning.

Strategy 3.3: Participate in both proactive and reactive dialogue with elected officials and appointed policy makers to advance annual legislative priorities.

OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
<p>Objective 3.3.a: Present to the Grand Rapids City Commission (and staff leadership, ad hoc committees) as needed to respond to current issues, no less than bi-annually. Measure: Number of presentations.</p>	<p>December 2008 December 2010</p>	<p>Healthy Homes Coalition</p>	<p>HHC Membership Greater GR CEHI Advocacy Coalition for Young Children/Families Pastors/faith leaders City staff Parents</p>
<p>Objective 3.3.b: Present to the Kent County Commission (and staff leadership, ad hoc committees) as needed to respond to current issues, no less than bi-annually. Measure: Number of presentations.</p>	<p>December 2007 December 2009</p>	<p>Healthy Homes Coalition</p>	<p>HHC Membership Greater GR CEHI Advocacy Coalition for Young Children/Families Pastors/faith leaders County staff Parents</p>
<p>Objective 3.3.c: Present to Michigan legislators from Kent County bi-annually. Measure: Number of presentations.</p>	<p>June 2007 June 2009</p>	<p>Healthy Homes Coalition</p>	<p>HHC Membership Greater GR CEHI Advocacy Coalition for Young Children/Families MCMCH MDCH Pastors/faith leaders Parents</p>

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<p>Objective 3.3.d: Present to the Michigan legislature and/or its various committees, working groups and at public hearings as needed to respond to current issues. Measure: Number of presentations.</p>	<p>Ongoing</p>	<p>Healthy Homes Coalition</p>	<p>HHC Membership Greater GR CEHI Advocacy Coalition for Young Children/Families MCMCH MNCEH MLSP MLHS Other MI lead coalitions MDCH Pastors/faith leaders Parents</p>
<p>Objective 3.3.e: Keep in contact with Congressman Ehlers and US Senators from Michigan as needed to respond to current issues. Measure: Number of contacts.</p>	<p>Ongoing</p>	<p>Healthy Homes Coalition</p>	<p>HHC Membership Greater GR CEHI Advocacy Coalition for Young Children/Families Alliance for Healthy Homes Nat. Ctr. For Healthy Housing Pastors/faith leaders Parents</p>

GOAL 4: All children 0-5 years of age are assessed for lead risk and receive appropriate testing and treatment.

Strategy 4.1: Develop incentives and remove barriers to testing for parents of one and two year-old children residing in the City of Grand Rapids and other high-risk communities and environments.

OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
<p>Objective 4.1.a: Hold an annual work session to develop an annual work plan for reducing current barriers and generating incentives for testing among one and two year-olds. Measure: Number of work session held.</p>	<p>February 2008 February 2009</p>	<p>Healthy Homes Coalition Kent County Health Dept. Outreach Committee</p>	<p>HHC Membership MDCH Health Plans Private providers Clinics Maternal Health workers Early childhood programs Parents</p>
<p>Objective 4.1.b: Implement annual work plans. Measure: Number of work plans developed.</p>	<p>January 2009 January 2010</p>	<p>Healthy Homes Coalition Kent County Health Dept. Outreach Committee</p>	<p>HHC Membership MDCH Health Plans Private providers Clinics Maternal Health workers Early childhood programs Parents</p>
<p>Objective 4.1.c: Evaluate testing data for one and two year-olds quarterly. Measure: Number of quarterly evaluations completed.</p>	<p>ongoing</p>	<p>Healthy Homes Coalition Kent County Health Dept.</p>	<p>HHC Membership MDCH</p>

GOAL 4: All children 0-5 years of age are assessed for lead risk and receive appropriate testing and treatment.	Strategy 4.2: Ensure all clinics and primary care facilities in Kent County follow the MDCH screening and testing plan.
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OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
Objective 4.2.a: Create a list of all clinic and primary care sites in Kent County and populate with 2006 testing data for baseline. Measure: Number of lists completed.	September 2007	Kent County Health Dept.	Healthy Homes Coalition Outreach Committee
Objective 4.2.b: Identify and contact 10 priority sites annually for education regarding the MDCH screening and testing plan. Measure: Number of primary care sites educated.	September 2008 September 2009 September 2010	Kent County Health Dept. Outreach Committee	Healthy Homes Coalition Primary Care Providers Clinics Health Payment Plan MDCH
Objective 4.2.c: Evaluate testing data by provider annually. Measure: Number of annual evaluations conducted.	September 2008 September 2009 September 2010	Kent County Health Dept.	Healthy Homes Coalition Outreach Committee

GOAL 4: All children 0-5 years of age are assessed for lead risk and receive appropriate testing and treatment.	Strategy 4.3: Reduce racial and ethnic disparities with participation in blood lead testing.
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OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
Objective 4.3.a: Evaluate testing data annually and report any racial and ethnic disparities with participation in testing (including confirmatory testing). Measure: Number of annual reports completed.	September 2007 September 2008 September 2009 September 2010	Kent County Health Dept.	Healthy Homes Coalition Outreach Committee
Objective 4.3.b: Develop and implement an annual work plan to reduce testing disparities through targeted activities, including geographical targeting.	September 2008 September 2009 September 2010	Healthy Homes Coalition Outreach Committee	Kent County Health Dept. Ethnic organizations Community organizations Faith organizations Media

GOAL 4: All children 0-5 years of age are assessed for lead risk and receive appropriate testing and treatment.

Strategy 4.4: Provide follow-up services for children with blood lead levels above 5 µg/dL.

OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
<p>Objective 4.4.a: Further develop and continue to implement an anticipatory guidance notification program for parents of children who test between 5.0 and 9.9 µg/dL. Measure: Percentage of parents in target group receiving contact.</p>	<p>June 2008</p>	<p>KCHD Healthy Homes Coalition</p>	<p>Health Payment Plans Primary Care Providers</p>
<p>Objective 4.4.b: Ensure that a minimum of two case management visits are offered to all parents of children testing above 10.0 µg/dL, with 90% participating in at least one visit. Measure: Percentage of parents in target group participating.</p>	<p>ongoing</p>	<p>KCHD Healthy Homes Coalition</p>	<p>Health Payment Plans Primary Care Providers</p>

GOAL 5: <i>Get the Lead Out!</i> activities are financially sustainable through 2010.	Strategy 5.1: Secure government funding contracts.
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OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
Objective 5.1.a: Cultivate relationships with government agencies, seeking opportunities for innovation, model programs and unique opportunities where none exist. Measure: Number of government agencies with healthy relationships.	ongoing	Healthy Homes Coalition	HHC Membership Greater GR CEHI GR Lead Hazard Control
Objective 5.1.b: Prioritize funding opportunities annually. Measure: Number of reports of priorities.	December 2007 December 2008 December 2009	Healthy Homes Coalition	HHC Membership Greater GR CEHI GR Lead Hazard Control
Objective 5.1.c: Submit six funding requests annually Measure: Number of funding requests submitted.	December 2008 December 2009 December 2010	Healthy Homes Coalition	HHC Membership Greater GR CEHI GR Lead Hazard Control

GOAL 5: <i>Get the Lead Out!</i> activities are financially sustainable through 2010.	Strategy 5.2: Secure funding contracts with private philanthropy.
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OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
Objective 5.2.a: Establish the relationships needed to collect detailed information on the funding priorities, values and relationships of private philanthropy. Measure: Number of relationships established/maintained.	Ongoing	Healthy Homes Coalition	HHC Membership Greater GR CEHI
Objective 5.2.b: Prioritize funding opportunities annually. Measure: Number of reports of priorities.	December 2007 December 2008 December 2009	Healthy Homes Coalition	HHC Membership Greater GR CEHI
Objective 5.2.c: Submit six funding requests annually Measure: Number of funding requests submitted.	December 2008 December 2009 December 2010	Healthy Homes Coalition	HHC Membership Greater GR CEHI

GOAL 5: <i>Get the Lead Out!</i> activities are financially sustainable through 2010.	Strategy 5.3: Develop and promote a fee-for-service structure.
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OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
Objective 5.3.a: Evaluate the fee-for-service structure used by <i>Get the Lead Out!</i> when under the administration of the Community Leadership Institute and adjust accordingly. Measure: Number of updated fee-for-service policies.	July 2007	Healthy Homes Coalition	
Objective 5.3.b: Seek fee-for-service opportunities that are in keeping with strategic vision, mission, values and goals. Measure: Number of fee-for-service opportunities secured.	Ongoing	Healthy Homes Coalition	HHC Membership MDCH

GOAL 5: <i>Get the Lead Out!</i> activities are financially sustainable through 2010.	Strategy 5.4: Develop a major gifts donor program.
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OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
Objective 5.4.a: Develop annual donor campaign, including: <ul style="list-style-type: none"> • Financial goal • Gift categories and goals • Prospects • Prospect contacts • Timeline for implementation Measure: Number of campaign work plans produced.	January 2008 January 2009	Healthy Homes Coalition	HHC Membership
Objective 5.4.b: Implement annual campaign. Measure: Number of dollars raised.	December 2008 December 2009	Healthy Homes Coalition	HHC Membership

GOAL 5: *Get the Lead Out!* activities are financially sustainable through 2010.

Strategy 5.5: Develop and promote a membership fee structure.

OBJECTIVE	TIME FRAME	LEAD ORGANIZATION	RESOURCES
Objective 5.5.a: Set fee structure. Measure: Number of fee structures established.	June 2008	Healthy Homes Coalition	
Objective 5.5.b: Renew memberships, including fee, annually. Measure: Number of renewed memberships. Measure: Number of dollars paid in memberships.	June 2009 June 2010	Healthy Homes Coalition	HHC Membership

Management of the Plan

This plan is a strategic management tool for the *Get the Lead Out!* Collaborative Body, Project Coordinator, and project partners. The Vision, Mission and Values will provide broad guidance for the Collaborative Body for decision-making that falls beyond the stated Goals of this document.

The Goals and Strategies will form the agenda framework for the Collaborative Body's regular meetings (currently held bi-monthly). These regularly scheduled meetings will be used to determine if the Collaborative is meeting its Goals in a timely manner. If the Goals are not being met, it is the responsibility of the Collaborative as a whole, as well as individual partner organizations, to immediately determine a corrective course of action.

This plan calls for the continued engagement of two working committees (Hazard Reduction and Outreach) and the continued leadership of the Healthy Homes Coalition Board of Directors. Additional work groups and work sessions will be organized to advance this plan.

The *Get the Lead Out!* Program Coordinator will assist these committees and their chairperson(s) with fulfilling their leadership responsibilities. The principal role of these committees will be to advance the Strategies set forth in this plan through achievement of the Objectives in a timely manner.

Additional Ad Hoc committees may be developed by the Collaborative on an as needed basis to assist the Collaborative and Project Coordinator in meeting these Goals.

Following this is the key to methodically moving the Collaborative towards fulfillment of their Vision *to end lead poisoning among children in Kent County*.

Amending the Strategic and Action Plans

Recommendations for amendment to this Strategic Plan must be approved by the Collaborative Body at regularly scheduled meetings. Approval will be through the consensus of those present, and will take into consideration the interests of regularly participating partners who are not present at the time of discussion. Care should be taken to protect the integrity of this plan and to avoid repeated amendments for the purpose of extending timelines.

These interim amendments will be incorporated into an updated written plan that should be submitted by the Project Coordinator to the Collaborative Body for annual approval.

Participants

Michele Bishop	Child & Family Resource Council
Bill Butts	City of Grand Rapids - Housing Rehabilitation Office
Hugo Claudin	Spectrum PANC
Joan Dyer	Kent County Health Department
Sr. Liz Garcia	St. Andrews Cathedral
Diane Gibbs	Spectrum Health - Healthier Communities Dept.
Bethany Gordon	Calvin College, Department of Nursing
Gail Gunst Heffner	Calvin College, Office of Community Engagement
Paul Haan	Healthy Homes Coalition of West Michigan
Lynn Heemstra	City of Grand Rapids - Office of Children, Youth and Families
Mary Hockwalt	Michigan Family Resources - Head Start
Christine Holcomb	Community Rebuilders
Chuck Hoyt	Lighthouse Communities
David Jacobs	Home Repair Service of Kent County
Julia LaPorte	Kent County Health Department
Jean Martin	Grand Valley State University, Kirkhof College of Nursing
Virginia Million	City of Grand Rapids – Housing Inspections
Evie Philippi	Spectrum health – Healthier Communities
Clay Powell	Rental Property Owners Association
Esther Reyes	Garfield Park Neighborhoods Association
Melissa Sanders	Saint Mary's Browning Claytor Clinic
Pat Schafer	Grand Valley State University, Kirkhof College of Nursing
Sara Stachon	Child & Family Resource Council
Doug Stek	City of Grand Rapids - Housing Rehabilitation Office
Richard TenHoor	Home Repair Services of Kent County
Deb VanderMolen	Kent Regional Coordinated Child Care
Jane Wolterstorff	Kent County Health Department