

North Carolina Injury & Violence Prevention Branch
2009-2014 Strategic Plan Review Project

Final Report

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BACKGROUND AND PURPOSE

The North Carolina Division of Public Health (DPH) Injury & Violence Prevention Branch (IVPB) seeks to reduce the burden of Injury and violence, which are significant and largely preventable public health problems. *Building for Strength: North Carolina's Strategic Plan for Preventing Injuries and Violence 2009-2014* is the DPH IVPB's five-year blueprint for building and strengthening injury and violence prevention efforts in North Carolina through a systems approach (Building for Strength, 2009).

In late 2008, the NC IVPB initiated and led a process to develop the Strategic Plan in collaboration with injury and violence prevention (IVP) partners from across the state of North Carolina. In April 2009, the strategic plan was finalized and in August 2009, the Injury and Violence Prevention State Advisory Council (IVP-SAC) was formed to monitor and advance the overall plan by promoting collaboration among appropriate partners.

In August 2011, the IVPB secured five-year funding from the Centers for Disease Control & Prevention (CDC) to build capacity for IVP in the state of North Carolina. As part of this funding, the IVPB proposed to review the status and progress of the state's injury and violence prevention strategic plan.

The *Building for Strength* Strategic Plan for Preventing Injuries and Violence in North Carolina from 2009-2014 has been guiding the direction of the NC DPH IVP for approximately two years. The overall goal of the plan calls for a 15 percent reduction in the rate of morbidity and mortality from injury and violence. The plan focuses on the three leading causes of death from unintentional injury (motor vehicle crashes, poisoning, and falls), and the two leading causes of intentional injuries (suicide and homicide). The plan includes six goals for preventing injuries and violence in North Carolina, around which 10 Goal Teams were formed (five cross-cutting and five specific to injury topics):

1. **Data and Surveillance:** Increase the use of injury and violence prevention data through a comprehensive, coordinated injury surveillance system that is accurate, readily available and, sustainable and that is utilized to guide injury and violence prevention programs and policies at the local, regional and state level.
2. **Research and Evaluation:** Foster efforts to conduct useful injury and violence research and evaluation, and foster efforts to disseminate findings to promote innovation and promising practices.
3. **Messaging, Policy and Environmental Change:** Develop strong, vocal community support for injury and violence prevention and the creation of safe environments by reframing unintentional injuries and violence as unacceptable and promoting policies that support prevention of injury and violence.
4. **Saving Lives (n=5 teams):** Reduce the rate of morbidity caused by injury and violence by 15 percent, thus also reducing injury-and-violence-related mortality by implementing prioritized, data-driven strategies and programs, policies, and innovative and tested practices for five injury issues: a) Motor Vehicle Crashes; b) Falls; c) Poisoning; d) Violence/Assault; and e) Suicide.
5. **Building the Injury Prevention Community:** Increase coordination among Injury and Violence Prevention partners at the local, regional and state level to create a more efficient system and a broader, stronger constituency.
6. **Workforce Development:** Develop a statewide injury and violence prevention workforce that meets core injury and violence prevention competencies as outlined by the National Training Initiative for Injury and Violence Prevention (NTI) and State and Territorial Injury Prevention Directors Association (STIPDA).

The goals of the strategic plan review were to: 1) Assess progress in meeting the plan's objectives; 2) Conduct a one-day work session among IVP-SAC and Goal Team members to review progress, consider changes, and

agree to next steps in completing the plan; and 3) Develop an addendum to the *Building for Strength* strategic plan that describes recommendations for meeting the plan's overall and goal-specific objectives during the final three years of the plan (2012-2014).

For IVPB staff and partners to fully participate in the review of the strategic plan, the IVPB contracted with team members Dr. Carolyn E. Crump and Mr. Robert J Letourneau, MPH, from The University of North Carolina at Chapel Hill (UNC) Gillings School of Global Public Health, Department of Health Behavior (HB)/ Injury Prevention Research Center.

This Final Report summarizes results from three primary components of UNC's work:

- I. Goal Team Progress Survey
- II. IVP-SAC Retreat Planning, Facilitation, and Evaluation
- III. Summary of Retreat Outcomes to Inform IVP Strategic Plan Addendum.

I. GOAL TEAM PROGRESS SURVEY

A. Background

UNC Team members conducted an in-person meeting with IVP-SAC leaders (Alan Dellapenna, Leah Perkinson, Jennifer Woody, Scott Proescholdbell, and Stephania Sidberry) on September 29, 2011. During this meeting, UNC team members: 1) discussed the Strategic Plan Review Project Goals and UNC's Project Phases; 2) discussed general progress made to date by IVP-SAC and Goal Teams; and 3) reviewed a preliminary approach to assess progress, including the degree to which Goal Teams have completed objectives and met progress check evaluation measures.

Following this meeting, IVP-SAC leaders pilot-tested survey instruments developed to assess goal team objective progress. Subsequent to the pilot-test, Alan Dellapenna and Leah Perkinson contacted Goal Team leads in mid-October 2011 to introduce the strategic plan review project and the process by which Goal Team Progress would be assessed. They provided each Goal Team Lead an electronic copy of a Goal Team-specific survey instrument to: 1) Assess progress in meeting plan objectives; 2) Identify how important it will be to meet original objectives by 2014; and 3) Identify factors that may contribute to the Goal Team making future progress in meeting existing or to-be-revised objectives. Goal Team Leads were asked to submit one completed survey (consolidated across goal team members) to Jennifer Woody by Friday, November 18, 2011.

In late November/early December 2011, UNC Team member summarized results from the 10 Goal Team Progress surveys in preparation for a Quarterly IVP-SAC meeting on December 15, 2011 in Raleigh, NC. UNC provided an 18-page **Goal Team Objective Progress Survey Summary** report (Appendix A) to IVPB staff, and provided hard copies of the report to attendees at the start of the meeting. During the meeting, UNC Team members briefly described the methods used to conduct the survey and oriented participants to the results (Table 1). IVPB staff provided an electronic copy of the report to IVP-SAC members and all Goal Team leads following the meeting.

Table 1. Summary of Goal Team Objective Progress Survey.

<i>Progress in completing objectives and progress check evaluation measures.</i>	
1.	Two years into a five-year strategic plan (or 40% of plan’s timeframe), approximately 41% of objectives and 37% of progress checks evaluation measures are either ‘a lot’ or ‘fully’ completed.
2.	For 63% of objectives and 63% of progress check evaluation measures (not completed), Goal Teams feel it ‘very’ or ‘extremely’ important to complete them by 2014. They feel it ‘extremely’ important for 44% of objectives.
<i>Changes to enhance Goal Team processes.</i>	
3.	50% of Goal Teams (n=5 of 10) report that changing team membership will be ‘very’ or ‘extremely’ important to help them meet their current or revised strategic plan objectives. Several comments about this included widening membership to non-state/agency employees from multiple disciplines or backgrounds.
4.	Only 20% (n=2 of 10) of Goal Teams feel that changing team leadership ‘extremely’ important (no Teams rated it as ‘very important’) to help them meet their current or revised strategic plan objectives. Several teams commented on the importance of changing team leadership, with several noting the need for a co-chair to share leadership responsibilities.
5.	60% of Goal Teams (n=6 of 10) reported that collaboration or overlap with other teams would be ‘very’ or ‘extremely’ important to help them meet their current or revised strategic plan objectives. There seems to be some agreement that the GT1-Data and GT3-Policy have the most ‘opportunity’ to collaborate with other goal teams.
6.	The majority (80%) of Goal Teams (n=8 of 10) report that revising or updating their team’s objectives will be ‘very’ or ‘extremely’ important to help them meet their current or revised strategic plan objectives and progress check evaluation measures and narrative comments provide additional details.
7.	Recommendations or observations about Goal Team Meetings generally focused on: frequency of meetings (several teams suggested a need to increase frequency); meeting facilitation (e.g., review objectives/evaluation measures at each meeting, have agendas, send/summarize minutes or progress reports); using technology to facilitate workgroup meetings; and considering ‘joint’ goal team meetings.
8.	Recommendations or observations about the IVP SAC generally focused on: identifying opportunities for Goal Team leads to meet/discuss more formally at/during/following SAC meetings; identifying mechanism by which Goal Team members can be more involved with/aware of SAC happenings/decision-making.
<i>Resources needed for goal teams to meet current or revised objectives.</i>	
9.	40% of Goal Teams (n=4 of 10) reported that funding would be ‘very’ or ‘extremely’ important to help them meet their current or revised strategic plan objectives. While funding would help many of the teams, comments suggest that meeting objectives is not solely depending on funding.
10.	Six Goal Teams (60%) reported that existing or other strategic plans related to the work of their goal teams existed. Several examples were listed and one website was provided.

II. IVP-SAC RETREAT

A. Retreat Planning

Through email communication and six planning sessions conducted between November and January 2012 (November 30, 2011; December 13 and 21, 2011; and January 4, 13, and 18, 2012), UNC Team members and key IVPB staff and IVP-SAC leadership (Alan Dellapenna, Jennifer Woody, and Leah Perkinson) discussed the agenda and activities for the January 19, 2012 IVP-SAC Retreat.

UNC Team members led the development of the retreat agenda and facilitators’ guide and developed handouts or other materials that were identified for each Retreat session. UNC Team members printed, copied, and assembled 50 Retreat Folders, and prepared nametags, tabletop tent labels, and other facilitation materials for co-presenters at the retreat. IVPB staff led efforts to communicate information about the retreat with attendees (e.g., sending invitations, tracking RSVPs, and managing meeting room and food logistics).

B. Retreat Facilitation

On January 19, 2012, UNC Team members led the implementation of the one day retreat-style working meeting in Raleigh, NC for 43 injury and violence prevention staff, researchers, and partners to review and identify changes to the State of North Carolina’s 2009-2014 Injury & Violence Prevention Strategic Plan. Alan Dellapenna and Jennifer Woody co-presented for several sessions, however, the day was designed for them to be retreat participants, rather than facilitators.

The retreat agenda (Table 2) included participatory and engagement methods to facilitate attendees to share plan successes, assess progress, exchange experiences, and conduct action planning to revise strategic plan objectives (and if possible, progress check evaluation measures and action steps).

Table 2. January 12, 2012 IVP-SAC Retreat Agenda.

Time	Activity
9:00 – 9:15 am	Welcome/Review of Retreat Goals & Agenda <ol style="list-style-type: none"> Review successes and progress of the IVP-SAC and Goal Teams to complete NC IVP Strategic Plan Objectives. Develop revised lists of objectives/progress check evaluation measures for each Team to inform an addendum to the NC IVP Strategic Plan. Consider changes to the structure, make-up, and processes of Goal Teams and the IVP-SAC. Identify next steps for the IVP-SAC and Goal Teams to complete the objectives outlined in the Strategic Plan.
9:15 – 9:55 am	Goal Team and Retreat Participant Introductions (Worksheet #1)
9:55 – 10:30 am	Background <ul style="list-style-type: none"> Overview of the IVP Strategic Plan State Advisory Committee (SAC) Successes Goal Team Products/Initiatives, 2009-2011 Plan Objective Progress Survey Results
10:30 – 10:45 am	<i>Break</i>
10:45 am – 12:00 pm	Goal Team Work Session #1: Revising Objectives (Worksheet #2)
12:00 – 1:00 pm	Networking Lunch
1:00 – 1:15 pm	<i>Break</i>
1:15 – 2:00 pm	Goal Team Work Session #2: Identifying Processes to Ensure Success (Worksheet #3)
2:00 – 2:45 pm	Consideration of Cross-Cutting/Emerging Issues relevant to the IVP Strategic Plan <i>TBI, Child Maltreatment, and Alcohol</i>
2:45 – 3:00 pm	<i>Break</i>
3:00 – 4:10 pm	Goal Teams Reports of Next Steps
4:10 – 4:20 pm	Retreat Evaluation
4:20 – 4:30 pm	Retreat Wrap-Up

C. Retreat Evaluation

1. Methods

The retreat was evaluated using a one-page, 21-item, anonymous written survey, included in participant folders and collected at the end of the retreat (Table 3). The participant evaluation survey was divided into three sections: 1) Satisfaction with Retreat Sessions; 2) Achievement of Retreat Goals; and 3) Retreat Planning and Logistics.

For each part of the evaluation survey, participants were asked between four to eight closed-ended questions related to their impressions of the Retreat. The closed-ended survey questions used Likert Scales with response categories ranging from 1 to 5, with 1 being “Not At All” to 5 being “Very” (e.g., satisfied, reached goals). Three open-ended questions were used to collect additional information about each section of the evaluation. In addition, an open-ended question asked for overall comments about the retreat.

Table 3. Retreat Participant Evaluation Questions.

<i>Please indicate how satisfied you were with each Retreat Session...</i>	<i>Not At All</i>					<i>Very</i>
1. Welcome/Review of Retreat Goals & Agenda	1	2	3	4	5	
2. Goal Team and Retreat Participant Introductions	1	2	3	4	5	
3. Background (IVP Strategic Plan, SAC Successes, Goal Team Products/Initiatives, and Plan Objective Progress Survey Results)	1	2	3	4	5	
4. Goal Team Work Session #1 (Revising Objectives)	1	2	3	4	5	
5. Networking Lunch	1	2	3	4	5	
6. Goal Team Work Session #2 (Next Steps)	1	2	3	4	5	
7. Consideration of Cross-Cutting/Emerging Issues for the Strategic Plan	1	2	3	4	5	
8. Goal Team Reports of Next Steps	1	2	3	4	5	
9. Please provide additional comments about the <i>Retreat Sessions</i> :						
<i>Please indicate the extent to which the Retreat reached its Goals...</i>	<i>Not At All</i>					<i>Very</i>
10. Review successes and progress of the IVP-SAC and Goal Teams to complete NC IVP Strategic Plan Objectives.	1	2	3	4	5	
11. Develop revised lists of objectives/progress check evaluation measures for each Team to inform an addendum to the NC IVP Strategic Plan.	1	2	3	4	5	
12. Consider changes to the structure, make-up, and processes of Goal Teams and the IVP-SAC.	1	2	3	4	5	
13. Identify next steps for the IVP-SAC and Goal Teams to meet objectives outlined in the Strategic Plan.	1	2	3	4	5	
14. Please provide additional comments about the <i>Retreat Goals</i> :						
<i>Please indicate your satisfaction with each of the following....</i>	<i>Not At All</i>					<i>Very</i>
15. Retreat Planning (agenda, logistics, emails, directions)	1	2	3	4	5	
16. Retreat Length/Duration	1	2	3	4	5	
17. Retreat Location (facility/accommodations)	1	2	3	4	5	
18. Retreat Rooms set-up	1	2	3	4	5	
19. Retreat Food	1	2	3	4	5	
20. Please provide additional comments about the <i>Retreat Planning and Logistics</i> :						
21. Please provide additional comments about the <i>NC IVP Strategic Plan Retreat</i> :						

UNC Team members coded completed evaluation forms, by respondent, and each was assigned an identifier number. They entered all quantitative data from the Likert Scale questions into an Excel spreadsheet designed for this evaluation and calculated averages, standard deviation, and counts for all respondents. Qualitative data (comments) were typed into a Word file, as written by respondents.

2. Results

Of the 43 participants attending the one-day retreat, 32 attendees completed a workshop evaluation, representing a response rate of 74.4 percent.

Participants were asked to rate how satisfied they were with the eight primary retreat sessions. Overall, results indicate that retreat sessions were rated at a range between 3.9 and 4.5 on a 5-point rating scale, and the overall workshop average for the eight sessions was **4.2** (standard deviation = 0.2) (Table 4).

Table 4: Retreat Session Satisfaction Summary.

Retreat Session (number of respondents)	Average Rating
1. Welcome/Review of Retreat Goals & Agenda (n=28)	4.2
2. Goal Team and Retreat Participant Introductions (n=30)	4.2
3. Background (IVP Strategic Plan, SAC Successes, Goal Team Products/Initiatives, and Plan Objective Progress Survey Results) (n=28)	3.9
4. Goal Team Work Session #1 (Revising Objectives) (n=32)	4.5
5. Networking Lunch (n=31)	4.1
6. Goal Team Work Session #2 (Next Steps) (n=32)	4.4
7. Consideration of Cross-Cutting/Emerging Issues for the Strategic Plan (n=32)	3.9
8. Goal Team Reports of Next Steps (n=28)	4.4
OVERALL	4.2
<p>9. Additional comments about Retreat Sessions (n=14)</p> <p><i>Introductions/Background</i></p> <ul style="list-style-type: none"> <i>[Goal Team and Retreat Participant Introductions] too long.</i> <i>[Background session] lacks SAC goals, SAC objectives, SAC process, meetings, planning timeframes, ways to communicate with Goal Teams (reciprocal).</i> <p><i>Work Sessions</i></p> <ul style="list-style-type: none"> <i>[Goal Team Work Session #1] got a lot done, but very difficult to hear when there were two groups working (talking out loud) in the same small space.</i> <i>[Goal Team Work Session #2] didn't seem like we were directed to work on 'next steps', [but] good discussion.</i> <i>Propose logic model followed for all goal teams.</i> <p><i>Networking</i></p> <ul style="list-style-type: none"> <i>[For the Networking Lunch] assigned groups limited network opportunities.</i> <i>Got a lot of work done by working through lunch (which I appreciated) but didn't really have any time at all to 'network.'</i> <p><i>Cross-Cutting Issues</i></p> <ul style="list-style-type: none"> <i>Think the discussion on cross-cutting issues needed more time and preparation.</i> <i>[Cross-cutting/Emerging Issues session] less clear.</i> <i>It seemed day went well then the emerging session brought the group down. Some topics just very political.</i> <i>Unclear to some regards as to how to vote and what resolution was [for the Cross-Cutting/Emerging Issues session].</i> <p><i>Report-Back</i></p> <ul style="list-style-type: none"> <i>Reports of Next Steps needed to be presented more quickly or made more interesting.</i> <p><i>Overall</i></p> <ul style="list-style-type: none"> <i>Very on track – time and topic; exceptional materials, great information/directions before meeting.</i> <i>Thanks so much! Very helpful.</i> 	

Participants were asked to rate the extent to which the Retreat reached its goals. Overall, results indicate ratings between 3.7 and 4.4 on a 5-point rating scale, and the overall average rating for the four goals was **4.1** (standard deviation = 0.3) (Table 5).

Table 5: Summary of Extent to which Retreat Goals were Reached.

Retreat Goals (number of respondents)	Average Rating
1. Review successes and progress of the IVP-SAC and Goal Teams to complete NC IVP Strategic Plan Objectives (n=32)	4.3
2. Develop revised lists of objectives/progress check evaluation measures for each Team to inform an addendum to the NC IVP Strategic Plan (n=32)	4.4
3. Consider changes to the structure, make-up, and processes of Goal Teams and the IVP-SAC (n=31)	3.7
4. Identify next steps for the IVP-SAC and Goal Teams to meet objectives outlined in the Strategic Plan (n=32)	4.0
OVERALL	4.1

Table 5: Summary of Extent to which Retreat Goals were Reached.

Retreat Goals (number of respondents)	Average Rating
5. Additional comments about Retreat Goals (n=4): <ul style="list-style-type: none"> • Goal team next step certainly, but not sure re: broader SAC. • [Regarding Identify next steps...] didn't seem like we were directed to work on 'next steps', [but] good discussion. • Great feedback – focus. • It is not clear and it is assumed that the strategic plan is “the” statewide prevention plan v. injury prevention plan. Appreciate that IVP Brach has included interagency partners in this discussion and planning. Our work together with others is strengthened as a result. 	

Participants were asked to rate the extent to which they were satisfied with Retreat planning. Overall, results indicate ratings ranging between 4.2 to 4.8 on a 5-point rating scale, and the overall average rating for the four goals was **4.6** (standard deviation = 0.2) (Table 6).

Table 6. Retreat Planning and Implementation Satisfaction Summary.

Retreat Logistics (number of respondents)	Average Rating
1. Retreat Planning (agenda, logistics, emails, directions) (n=32)	4.7
2. Retreat Length/Duration (n=32)	4.2
3. Retreat Location (facility/accommodations) (n=32)	4.8
4. Retreat Rooms set-up (n=32)	4.7
5. Retreat Food (n=32)	4.4
OVERALL	4.6
6. Additional comments about Retreat Planning and Logistics (n=16) <p><i>General Feedback</i></p> <ul style="list-style-type: none"> • Very helpful. • Very organized. The prep work was much appreciated. • How does conference include goal team objectives? • Very grateful to have had Carolyn help facilitate our small group and keep us focused. She was wonderful and very helpful. • Would prefer more workgroup time and less 'intro time.' • I loved the fact that this was very structured, facilitators stayed on task and on time. This was great! Great energy and interaction. • Have heard little to none for SAC re: plan since 2009/2010. This needs to change to be effective. <p><i>Meeting Facility</i></p> <ul style="list-style-type: none"> • Facility was beautiful but we need to accommodate those from out of town – too far to drive in one day with length of meeting, parking was hard to get (10 minutes of circling). Could we try Skype in the future? • Difficult to see (easel sheets) from back of room . • [Regarding retreat rooms set-up] Hard to work with two groups in close quarters. • Very difficult to hear when there were two groups working (talking out loud) in the same small space. <p><i>Food/Lunch:</i></p> <ul style="list-style-type: none"> • Piece of fruit? Bag or 2 of carrots available as shared side? • Need more hummus and cheese bag lunches. • Enjoyed veg[etarian] option. • Vegetarian option appreciated. • Thanks for vegetarian lunch option! 	

Participants provided a variety of additional comments about the retreat (Table 7) (n=10).

Table 7. Additional Comments about the Retreat.

<p><i>General Feedback</i></p> <ul style="list-style-type: none"> • Great job IVP staff. Appreciate the facilitators – job well done. • Thanks for all the hard work! • Look forward to next steps of our work together.

Table 7. Additional Comments about the Retreat.

<p><i>Facilitation Techniques</i></p> <ul style="list-style-type: none"> • Great facilitation and meeting tools. • Good workshop – brought lots of folks together & got a lot done to move forward with the injury world. • Great working group – lots of participation. Good size of workgroups/teams. • Gold sheet SAC does not state what goals, objectives, v. role as reference as the cross-cutting discussion. • Good facilitators! Good coordination – thank you Jennifer. Thank you. <p><i>Meeting Facility</i></p> <ul style="list-style-type: none"> • Facility was great, didn’t enjoy lunch. Sandwich turkey was a little dry and meat not good. Thank you though, for providing it and breakfast. <p><i>Miscellaneous</i></p> <ul style="list-style-type: none"> • Using the Haddon Matrix; there appear to be groups that are not represented, e.g., those representing [agents?] – car manufacturers, pharmaceutical industry, communication devices.
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III. SUMMARY OF RETREAT OUTCOMES TO INFORM STRATEGIC PLAN ADDENDUM

Goal Team Work Sessions #1 and #2, along with a session to consider cross-cutting/emerging issues relevant to the IVP strategic plan, at the January 19, 2012 IVP Retreat, represented the core ‘working sessions’ of the retreat. Outcomes from these three sessions will help NC IVPB staff to develop an addendum to the 2009-2014 IVP Strategic Plan.

A. Work Session #1

Retreat participants worked in small groups by Goal Team during Work Session #1. Participants worked together to review and discuss changes they intend to make to their Team’s list of objectives and/or progress check evaluation measures. Using worksheets provided by UNC, each Goal Team (led by a small group facilitator) worked through a series of questions about their objectives and progress check evaluation measures, including:

1. What objectives will remain (e.g., because they are complete, still important)?
2. What objectives should be eliminated (e.g., because of limited progress, no longer applicable/relevant, or possibly because they should become the responsibility of a different (existing or new) Goal Team)?
3. What objectives should be revised (e.g., because they were too vague, unspecific, unrealistic)
4. What objectives could be adopted from other/existing strategic plans?
5. What objectives should be added (e.g., because others were completed/eliminated or if a progress check evaluation measure were ‘elevated’ to objective status (as worded or with revised wording)).

At the end of the retreat and/or in follow-up to the retreat by email, Goal Team (GT) leads submitted revised lists of strategic plan objectives to Jennifer Woody/UNC Team members (Table 8). These draft objectives will be used by IVPB staff as the basis for creating an IVP Strategic Plan Addendum, which will be developed as a separate document by IVPB staff in April/May 2012. As a result, the list of objectives shown in Table 8 are considered draft and may be revised for the final version of the Plan Addendum.

Table 8. Post-Retreat Draft Strategic Plan Objectives, by Goal Team.

Goal Team	Post-Retreat Draft Objectives
GT 1: Data and Surveillance	<ol style="list-style-type: none"> 1. Convene the Data Goal Team for the State Strategic Plan to address gaps in existing data and data systems (by 09/09). 2. Conduct an assessment of existing data sources that contain injury and violence prevention information, and create a data source list to post on the DPH IVPB website. 3. Identify and document data gaps that impact the ability to do injury prevention. 4. Complete a Data Goal Team report with methods for utilizing data to guide injury and violence prevention programs, and policies at the state, regional, and local levels. 5. Identify an agency to take responsibility for web-enabling and annually updating the data inventory.

Table 8. Post-Retreat Draft Strategic Plan Objectives, by Goal Team.

Goal Team	Post-Retreat Draft Objectives
GT 3: Messaging, Policy, and Environmental Change	<ol style="list-style-type: none"> 1. Focus on policy and messaging needs of other goal teams and SAC. 2. Assure formation of cross-cutting injury-and-violence-free network with issue-specific champions and organizations, including non-profits. 3. Assist in the development of a three-year substantive policy agenda for NC injury and Violence Prevention (08/10). 4. Support other goal teams in their policy work and goals. 5. Monitor and support administrative policy, especially on cross-cutting IVP issues.
GT 4A: Saving Lives–Motor Vehicle Crashes	<ol style="list-style-type: none"> 1. Reduce DWI by: obtaining morbidity data (by 12/2012); working with partners to encourage increased enforcement and conviction rates (ongoing); exploring possibility of creating a media campaign (ongoing); and developing policy recommendations addressing improvements in interlock devices for offenders and the process for handling cases in the court system (by 5/2012). 2. Reframe speed as a public health problem by: Pursuing resources to develop a media campaign highlighting the public health burden of speed that focuses on high risk areas (ongoing); including resources for evaluation of efforts and ensuring promotion of results that demonstrate effectiveness or changes needed to achieve effectiveness (ongoing); and developing policy recommendations around use of speed cameras in school and work zones and identification of safety corridors and traffic rules associated with them. 3. Focus on reducing teen driver crashes by: developing and disseminating county-specific crash profiles for teen drivers through stakeholder networks and other appropriate avenues (by 8/2013); using the CDC message reframing process to develop messages around teen driving (by 12/2013); supporting evaluation efforts of teen driving safety programs that are currently happening at the county level (i.e. Johnston County) and disseminating findings (ongoing); and developing policy recommendations around increasing the minimum age for completion of Level II of GDL to 16.5 year of age and enhancements to drivers education programs in the state that show promise of addressing the problem (by 5/2012). 4. Improve safety for motorcyclists by: creating a document outlining the problem of motorcycle injury in NC using linked crash, EMS, Emergency Department, and hospital discharge data (by 11/2013); promoting the benefits of North Carolina’s current motorcycle helmet law in lives saved, brain and other injuries prevented, and money saved. (ongoing); and evaluating motorcycle safety courses and using the findings to develop policy recommendations for enhancement to the course (by 5/2014). 5. Strengthen occupant protection by: identifying resources to support audience research with law enforcement officers to create messages that can help build support for policy changes (asap); creating a fact sheet outlining safety benefits of primary enforcement and higher fines (by 8/2012); developing policy recommendations that call for primary enforcement for all positions, and increasing fines for all positions to \$100 (by 5/2012).
GT 4B: Saving Lives–Falls	<ol style="list-style-type: none"> 1. Implement the policy planning initiative as outlined by the opportunity grant from the National Association of Chronic Disease Directors (08/09-02/10). 2. Build and strengthen regional/local falls prevention (FP) coalitions. 3. Develop and disseminate evidence based falls prevention programs. 4. Increase access, timeliness and understanding of falls prevention data. 5. Ensure that each community or county has an array of resources essential for falls prevention. 6. Educate and communicate with key constituencies about falls prevention. 7. Cultivate relationships with key new partners in NC. 8. Use policy as a prevention tool.
GT 4C: Saving Lives–Unintentional Poisonings	<ol style="list-style-type: none"> 1. The SAC Poisoning Goal Team, consisting of a broad and diverse array of stakeholders (i.e. DPH, MH, OCME, Poison Center, Law Enforcement, etc) will serve as a state resource to facilitate collaboration, communication, research, and public health policy around poisonings. 2. Promote best-practices and evidence-based programs around unintentional poisonings to three key groups: 1) prescribers; 2) consumers and 3) public policy makers. 3. Support law enforcement infrastructure to prevent illegal distribution and use of controlled medications. 4. Increase coordination between SAC poisoning Goal Team and other SAC Goal Teams.

Table 8. Post-Retreat Draft Strategic Plan Objectives, by Goal Team.

Goal Team	Post-Retreat Draft Objectives
GT 4D: Saving Lives– Violence/Assault	<ol style="list-style-type: none"> 1. Establish a non-fatal violence data collection <u>inventory</u> (state level data/ national level data) that captures and links morbidity information from multiple sources to inform programs, practices, policies and evaluation related to child maltreatment (physical and sexual abuse and neglect), IPV, SV, and youth violence (violence and nonviolent offenders are defined differently). 2. Use NCVDRS data to identify and assist communities with high rates of violence or significant disparities in violence rates to better utilize available data to inform prevention efforts and support the implementation of effective and comprehensive prevention programs. 3. Increase knowledge/awareness and use of evidence based promising practices. 4. Collect relevant definitions and terms including descriptions of forms of violence to inform policies, practices, and programs at the state and local levels.
GT 4E: Saving Lives–Suicide	<ol style="list-style-type: none"> 1. Use Garrett Lee Smith (GLS) funds from SAMSHA to implement suicide prevention training for Child and Family Support Teams and school-based and school-linked professionals including (2-day ASIST gatekeeper training for 175 Child and Family Support team individual and school health center staff and 1/2-day SafeTALK gatekeeper training for 275 other school staff in systems across the state (10/09-8/11). 2. Use GLS funds from SAMHSA to implement suicide prevention training for: school staff within counties of high military concentration, providers of services to National Guard families, staff of Centers for Prevention Resources, and juvenile justice staff. Training will include two-day ASIST gatekeeper workshops, half-day SafeTALK gatekeeper workshops, Lifelines curriculum and Lifelines Postvention for 1,200 staff in these systems across the state (10/11-7/2014) . 3. Maintain a Youth Suicide Prev. Communications Campaign using GLS funds from SAMHSA (10/11-7/14). 4. Develop a collaboration plan with NC Veterans Affairs staff and the state’s Natl. Guard to support existing efforts of military to prevent suicide within the military and among military families/civilian communities. 5. Create a network of suicide prevention, intervention and postvention providers by identifying programs that exist state-wide (12/11-7/14). 6. Development an on-line postvention curriculum that is free and accessible to educational institutions incorporating the policies and practices of the Division of Mental Health, the Division of Public Health and the Department of Public Instruction (12/11-7/14).
GT 5: Building the Injury Prevention Community	<ol style="list-style-type: none"> 1. Create and maintain a database of Injury and Violence Prevention stakeholders in NC that is updated bi-annually and available online (ongoing). 2. Create six Goal Teams with leadership of each team making up an advisory council to be appointed by the State Health Director including representative from (...). This group will guide implementation of this plan, address special projects, be used as a resource, and provide future direction for the growth of the injury and violence prevention field in NC (08/09). 3. Compile a preliminary toolkit that will be regular updated and made available to the members of the communication web and others through the DPH’s IVPB website. Information will include self-assessment tool for injury and violence prevention competencies, training opportunities, funding resources, policy initiatives, and agency resources (02/10) 4. Work with the Training and Workforce Development Goal Team to determine the feasibility of hosting an IVP symposium in NC to provide further opportunities for professional networking, garner attention for significant injury and violence prevention issues in NC and provide a professional development opportunity to stakeholders and others involved in the IVP work (8/2012). 5. Support the Workforce Development Goal Team, particularly around its work to hold annual trainings by providing time at the annual conference to present their work, and assisting with identification of training participants in local communities (ongoing). 6. Create an Injury Prevention Basics web page on the www.injuryfreenc@dhhs.nc.gov site that outlines a) What injury and violence prevention is b) List of partners in the state involved in injury and violence prevention c) Competencies for injury and violence prevention professionals (Safe States) d) Standards for local health departments (NAACHO) (12/2012). 7. Collect news information and share with the Injury and Violence Prevention Branch to include in a newsletter sent to the stakeholder list at least four times per year (ongoing). 8. Develop and disseminate a communications plan for injury and violence prevention that includes consistent language for all stakeholders to use when communicating about injury and violence prevention (12/2014). 9. Establish and implement a communications network for Injury and Violence Prevention such as: a webinar, conference call line, CDC Media Training (12/2014).

Table 8. Post-Retreat Draft Strategic Plan Objectives, by Goal Team.

Goal Team	Post-Retreat Draft Objectives
GT 6: Workforce Development	<ol style="list-style-type: none"> 1. Disseminate summary findings of the 2011 Workforce Needs Assessment to key groups in North Carolina by 3/12. 2. Facilitate at least one presentation by Academy graduate teams at future injury and violence and other conferences within their professional groups statewide within one year of graduation. 3. By the end of 2014, have a foundation laid that will facilitate integration of injury and violence prevention into nursing and medical school curricula. 4. Establish an annual Prevention Academy in North Carolina for professionals to enhance their knowledge and practice of Injury and Violence Prevention Core Competencies.

B. Work Session #2

Goal Teams continued to work in small groups during Work Session #2 to complete the revision of objectives. They also completed a worksheet to summarize the work they completed and/or assistance they may need to move forward. Specifically, they were asked to answer the following questions:

1. What types of overall changes did your Goal Team make to its Objectives (circle all that apply)?
 - a. We retained objectives (how many?)
 - b. We eliminated objectives (how many?)
 - c. We revised objectives
 - d. We adopted objectives from other existing plans in NC
 - e. We added objectives (how many?)
 - f. We made our objectives more consistent (e.g., wording, format, scope).
2. What improvements can your Goal Team make to Goal Team processes (e.g., meetings, conference call) to ensure progress?
3. What assistance does your Goal Team need from IVP Branch Staff to ensure progress?
4. What assistance does your Goal Team need from the IVP-SAC to ensure progress?
5. What assistance does your Goal Team need from or could we provide to other Goal Teams (and which teams) to ensure progress?

Table 9 provides a legend listing the full names of Goal Teams (abbreviated hereafter as GT 1-6) and is color-coded to visually distinguish summary information provided in Tables 10-14.

Table 9. Legend and Color-Coding Scheme for Tables 10-14⁹

GT1-DS	Goal Team 1: Data and Surveillance
GT2-RE	Goal Team 2: Research and Evaluation
GT3-MPEC	Goal Team 3: Messaging, Policy, and Environmental Change
GT4A-MV	Goal Team 4A: Saving Lives – Motor Vehicle Crashes
GT4B-FA	Goal Team 4B: Saving Lives – Falls
GT4C-UP	Goal Team 4C: Saving Lives – Unintentional Poisonings
GT4D-VA	Goal Team 4D: Saving Lives – Violence/Assault
GT4E-SU	Goal Team 4E: Saving Lives – Suicide
GT5-BIPC	Goal Team 5: Building the Injury Prevention Community
GT6-WD	Goal Team 6: Workforce Development

⁹ The Research and Evaluation Goal Team was disbanded because it was determined that research work was outside of the purview of the state’s plan for injury and violence prevention. Important partners in North Carolina injury and violence prevention work lead research efforts, notably, the University of North Carolina’s Injury Prevention Research Center. UNC IPRC serves on the State Advisory Council for Injury and Violence Prevention and informs the broader group about research initiatives as appropriate.

Goal Team leads verbally summarized information written on each Team’s worksheet during the 3:00 – 4:00 pm session, and submitted completed worksheets to UNC. Information contained on the worksheets was

cross-referenced with a list of revised objectives submitted to Jennifer Woody/UNC following the retreat to create a summary of the overall changes made to the strategic plan objectives (Tables 10-14).

Table 10. Summary of Original and Changes Made to IVP Strategic Plans Objectives ^a

	# of original	# retained, as is	# deleted	# edited/ revised	Adopted from other existing plans in NC	# added	final #
GT1-DS	4	2	0	2	No	1	5
GT2-RE	3	0	3	0	No	0	0
GT3-MPEC	3	1	0	2	No	2	5
GT4A-MV	1	0	1	0	No	5	5
GT4B-FA	2	1	0	0	Yes	7	8
GT4C-UP	2	0	0	2	Yes	2	4
GT4D-VA	3	0	0	3	Yes	1	4
GT4E-SU	4	1	0	2	No	3	6
GT5-BIPC	6	2	3	2	No	5	9
GT6-WD	4	0	1	3	No	1	4
Total	32	7	7	17	--	27	50

^a The Research and Evaluation Goal Team was disbanded because it was determined that research work was outside of the purview of the state’s plan for injury and violence prevention. Important partners in North Carolina injury and violence prevention work lead research efforts, notably, the University of North Carolina’s Injury Prevention Research Center. UNC IPRC serves on the State Advisory Council for Injury and Violence Prevention and informs the broader group about research initiatives as appropriate.

Table 11. Improvements to Goal Team processes (e.g., meetings, conference call) to ensure progress.

GT1-DS	<ul style="list-style-type: none"> None
GT2-RE	<ul style="list-style-type: none"> (Disbanded)
GT3-MPEC	<ul style="list-style-type: none"> Report from all other Goal Teams before we meet (do you have any policies to advance? What are they? What barriers do you foresee? What champions exist?) Conference call briefings for Goal Team co-chairs when needed.
GT4A-MV	<ul style="list-style-type: none"> A Meeting schedule (e.g., quarterly). Further develop their matrix for: DWI, Speed, Teen Driving, Distracted Driving, Motorcycle, Primary Enforcement for All Occupants in vehicles. Involve public instruction in schools with their efforts.
GT4B-FA	<ul style="list-style-type: none"> Keep meeting as we are (at least quarterly). Keep the objectives as the center of conversation.
GT4C-UP	<ul style="list-style-type: none"> Schedule a year’s worth of meetings in advance. Have agendas in advance. Post minutes following meetings. Share meeting minutes with other groups and get other groups’ summaries too. Conduct two in-person meetings and two over-the-phone meetings.
GT4D-VA	<ul style="list-style-type: none"> Create SMART objectives (focused and more specific). Continue (from here on out) to invite youth violence and child maltreatment to the table. Partner with other goal teams.
GT4E-SU	<ul style="list-style-type: none"> We will be applying for a Capstone Team from UNC to assist in achieving some objectives. There would be monthly reporting involved. We will be seeking to increase membership.
GT5-BIPC	<ul style="list-style-type: none"> We want to conduct calls with Health Department Directors every third Thursday afternoon (starting February 16, 2012).
GT6-WD	<ul style="list-style-type: none"> The team has made great progress. We have full participation from our team. We have a good mix of expertise on the team and full support from upper management for our efforts.

Table 12. Assistance needed from IVP Branch Staff to ensure progress.

GT1-DS	<ul style="list-style-type: none"> • None
GT2-RE	<ul style="list-style-type: none"> • (Disbanded)
GT3-MPEC	<ul style="list-style-type: none"> • Clone Jennifer [Woody]. • Do the work/heavy lifting. • Find meeting space.
GT4A-MV	<ul style="list-style-type: none"> • Want to bring in policy folks to discuss some policy changes they'd like to consider. • Data/Communication/Program/Policy Approaches
GT4B-FA	<ul style="list-style-type: none"> • Get buy in from DPH to keep doing this (staff support). • Capability to do webinars and conference line.
GT4C-UP	<ul style="list-style-type: none"> • Making sure there is help with copying/logistics. • A conference call line. • Capabilities to do webinars. • Help on how to incorporate others into the fold.
GT4D-VA	<ul style="list-style-type: none"> • Continued use of conference call line. • On-going support for breaking down silos. • Office and meeting space.
GT4E-SU	<ul style="list-style-type: none"> • Keep Jane. • Keep involving Scott for continued data and surveillance.
GT5-BIPC	<ul style="list-style-type: none"> • List of stakeholders to develop a resource guide (or further develop the one already on the IVP website). • Provide more resources and to make it more friendly for people to use it. • Conference call line. • Webinar capabilities (to also be used as a larger communication tool to disseminate information, implement programs, etc.).
GT6-WD	<ul style="list-style-type: none"> • Continue to look for additional sources of funding. • Continue to have Stephania serve as a liaison between GT5 and GT6. • Provide logistical and resource support.

Table 13. Assistance needed from the IVP-SAC to ensure progress.

GT1-DS	<ul style="list-style-type: none"> • Need updated Goal Team lead contact information whenever changes occur.
GT2-RE	<ul style="list-style-type: none"> • (Disbanded)
GT3-MPEC	<ul style="list-style-type: none"> • Sensitivity to cross-cutting issues and to loop us in when appropriate. • Call upon us as needed. • Members to promote the policy agenda as appropriate (in their professional or personal capacities).
GT4A-MV	<ul style="list-style-type: none"> • Set conference call schedule and meeting location.
GT4B-FA	<ul style="list-style-type: none"> • No report.
GT4C-UP	<ul style="list-style-type: none"> • Increasing communication about SAC, but having the Team Lead do more to share the minutes from SAC. • Have once/year meeting to review Goal Teams and consider membership and assess progress. SAC should do this for itself too.
GT4D-VA	<ul style="list-style-type: none"> • Insurance that all stakeholders are at the table when planning state-wide injury and violence events.
GT4E-SU	<ul style="list-style-type: none"> • Consider making policy recommendations for suicide prevention by 2014 to help form and promote legislative actions (modeled after what's been done in other states).
GT5-BIPC	<ul style="list-style-type: none"> • Meet one time a year (as a larger group). • Provide contacts and agency information for resource listing.
GT6-WD	<ul style="list-style-type: none"> • We will need assistance from the full SAC on identifying topics, applicants, and faculty from their respective regions. • We will also need assistance with logistics and identifying regional resources.

Table 14. Assistance needed from or could be provided to other Goal Teams to ensure progress.

GT1-DS	<ul style="list-style-type: none"> • Need From other teams: Information from every Goal Team on data required to meet their objectives. • Can provide to other teams: At-a-glance documents on how to use existing data sources.
GT2-RE	<ul style="list-style-type: none"> • (Disbanded)
GT3-MPEC	<ul style="list-style-type: none"> • Provide to other Goal Teams: <ul style="list-style-type: none"> ○ General policy insights. ○ Assistance with policy development/priorities. ○ Create and promote broader context. ○ Link with broader IV-free network. • Need from other Goal Teams: <ul style="list-style-type: none"> ○ Timely response to whom requested information. ○ Involvement in conference calls.
GT4A-MV	<ul style="list-style-type: none"> • Lynn Jones from BI Group suggested by Jan White (TBI). • Push ‘up-stream’ policy changes that thus far, no one is willing to do.
GT4B-FA	<ul style="list-style-type: none"> • Social Marketing Plan for Fall prevention can perhaps help others. • Conference calls (webinars) to show data online.
GT4C-UP	<ul style="list-style-type: none"> • All goal teams could benefit from increased communication from this team, particularly GT1: Data & Surveillance and GT4E: Suicide. • Make sure everyone is aware what the other groups are doing.
GT4D-VA	<ul style="list-style-type: none"> • Marketing: raise awareness, disseminate, frame. We can assist marketing with framing community. • Policy: Help us advocate for better data linkages; help us to develop better prevention policy. • Data: update data inventory; help identify protective factor data; translate shared risk and protective factors into evaluation questions. • Will be good to bring in and highlight shared suicide protective and risk factors.
GT4E-SU	<ul style="list-style-type: none"> • Need assistance from GT1 which has provided valuable information on morbidity and mortality. • Need assistance from Messaging and Policy, with messaging for how schools don’t deal with suicide until it happens to them (make it personal and meaningful to them to get involved before something like a teen suicide happens).
GT5-BIPC	<ul style="list-style-type: none"> • Continued support to conduct the IP Conference so they have a venue to kick off their workforce training. • Want the needs assessment shared with audience/group. • Working with Data/Surveillance group to summarize needs assessment to be distributed at the conference.
GT6-WD	<ul style="list-style-type: none"> • We need to know from Goal Teams what the important IVP issues are in your region. • We will send out a survey to Goal Team members to help match regions with the appropriate IVP issues by region. • Our Goal Team will send the 2011 workforce development needs assessment to all goal team members. A link to the survey will be attached. Please post the assessment on your website or link to it.

C. Cross-Cutting/Emerging Issues Session

During the session held to consider cross-cutting/emerging issues relevant to the strategic plan (e.g., brain injury, child maltreatment, and alcohol), from 2:00 – 2:45 pm, retreat attendees participated in individual and large group activities to consider if and/or how three additional injury issues, not originally included directly in the IVP Strategic Plan, could be considered for the addendum. Participants worked individually and then shared their anonymous responses to three questions:

1. How important it is for each issue to become part of the IVP Strategic Plan Process?
2. Should each issue: a) have its own set of objectives and therefore its own Goal Team; b) have objectives added to other Goal Teams; or c) be added to IVP-SAC’s objectives?
3. Who should be invited to join/ provide input to the IVP Strategic Plan Process (e.g., join the IVP-SAC/Goal Team)?

While there appeared to be consensus that the three cross-cutting issues are important to include as part of the IVP strategic planning process, the ways in which they could be incorporated were not specifically determined. However, retreat participants agreed that these issues do not warrant having their own goal teams. The session was included in the retreat to provide the IVP-SAC and IVPB staff additional information to consider these cross-cutting issues in the future.

North Carolina Injury & Violence Prevention Branch
2009-2014 Strategic Plan Review Project

Goal Team Objective Progress Survey Summary

Submitted to:

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Date:

December 15, 2011



BACKGROUND

The North Carolina Division of Public Health (DPH) Injury & Violence Prevention Branch (IVPB) seeks to reduce the burden of Injury and violence, which are significant and largely preventable public health problems. *Building for Strength: North Carolina's Strategic Plan for Preventing Injuries and Violence 2009-2014* is the DPH IVPB's five-year blueprint for building and strengthening injury and violence prevention efforts in North Carolina through a systems approach (Building for Strength, 2009). In late 2008, the NC IVPB initiated and led a process to develop the Strategic Plan in collaboration with IPV partners from across the state of North Carolina. In April 2009, the strategic plan was finalized and in August 2009, the Injury and Violence Prevention State Advisory Council (IVP-SAC) was formed to monitor and advance the overall plan by promoting collaboration among appropriate partners.

PURPOSE

The *Building for Strength* Strategic Plan for Preventing Injuries and Violence in North Carolina from 2009-2014 has been guiding the direction of the NC DPH IVP for approximately two years. The overall goal of the plan calls for a 15 percent reduction in the rate of morbidity and mortality from injury and violence. The plan focuses on the three leading causes of death from unintentional injury (motor vehicle crashes, poisoning, and falls), and the two leading causes of intentional injuries (suicide and homicide). The plan includes six goals for preventing injuries and violence in North Carolina, around which 10 Goal Teams were formed:

1. **Data and Surveillance:** Increase the use of injury and violence prevention data through a comprehensive, coordinated injury surveillance system that is accurate, readily available and, sustainable and that is utilized to guide injury and violence prevention programs and policies at the local, regional and state level.
2. **Research and Evaluation:** Foster efforts to conduct useful injury and violence research and evaluation, and foster efforts to disseminate findings to promote innovation and promising practices.
3. **Messaging, Policy and Environmental Change:** Develop strong, vocal community support for injury and violence prevention and the creation of safe environments by reframing unintentional injuries and violence as unacceptable and promoting policies that support prevention of injury and violence.
4. **Saving Lives (n=5 teams):** Reduce the rate of morbidity caused by injury and violence by 15 percent, thus also reducing injury-and-violence-related mortality by implementing prioritized, data-driven strategies and programs, policies, and innovative and tested practices for five injury issues: a) Motor Vehicle Crashes; b) Falls; c) Poisoning; d) Violence/Assault; and e) Suicide
5. **Building the Injury Prevention Community:** Increase coordination among Injury and Violence Prevention partners at the local, regional and state level to create a more efficient system and a broader, stronger constituency.
6. **Workforce Development:** Develop a statewide injury and violence prevention workforce that meets core injury and violence prevention competencies as outlined by the National Training Initiative for Injury and Violence Prevention (NTI) and State and Territorial Injury Prevention Directors Association (STIPDA).

In August 2011, the IVP secured five-year funding for the Centers for Disease Control & Prevention (CDC) to build capacity of NC DPH IVP Branch. As part of this funding, the IVP outlined plans to review the state's strategic injury and violence prevention plan. The goals of the strategic plan review are to: 1) Assess progress in meeting the plan's objectives; 2) Conduct a one-day work session among IVP-SAC and Goal Team members to review progress, consider changes, and agree to next steps in completing the plan; and 3) Develop an addendum to the *Building for Strength* strategic plan that describes recommendations for meeting the plan's overall and goal-specific objectives during the final three years of the plan (2012-2014).

For IVP staff to fully participate in the review of the strategic plan, the IVP Branch has contracted with team members Dr. Carolyn E. Crump and Mr. Robert J Letourneau, MPH, from The University of North Carolina (UNC) Gillings School of Global Public Health, Department of Health Behavior & Health Education (HBHE)/ Injury Prevention Research Center, to facilitate the review. UNC Team members will complete four project phases: 1) Project Planning, Document Review, and Conduct Goal Team Progress Survey; 2) IVP-SAC Retreat Planning; 3) IVP-SAC Retreat Facilitation; and 4) Summarize Retreat and Assist with Strategic Plan Addendum.

METHODS

UNC Team members conducted an in-person meeting with IVP-SAC leaders (Alan Dellapenna, Leah Perkinson, Jennifer Woody, Scott Proescholdbell, and Stephania Sidberry) on September 29, 2011. During this meeting, UNC team members: 1) Discussed the Strategic Plan Review Project Goals and UNC's Project Phases; 2) Discussed/clarified progress made to date by IVP-SAC & Goal Teams; and 3) Reviewed a preliminary approach to assessing progress, including the degree to which Goal Teams have completed objectives and progress check evaluation measures.

Following this meeting, IVP-SAC leaders pilot-tested survey instruments developed to assess goal team objective progress. Subsequent to the pilot-test, Alan Dellapenna and Leah Perkinson contacted Goal Team leads in mid-October to introduce the strategic plan review project and the process by which Goal Team Progress would be assessed. They provided each Goal Team Lead an electronic copy of a Goal Team-specific survey instrument to: 1) Assess progress in meeting plan objectives; 2) Identify how important it will be to meet originally developed objectives by 2014; and 3) Identify factors that may contribute to your Goal Team making future progress in meeting existing or to-be-revised objectives. Goal Team Leads were asked to submit one completed survey (consolidated across goal team members) by Friday, November 18, 2011.

Team leaders were allowed the opportunity to decide the most appropriate approach to having their Teams ([Appendix A](#)) complete the four parts of this survey. The following examples were provided:

1. Team Leads could forward the cover letter and survey to each Goal Team member, asking them to complete the survey as individuals and request that it be returned to the Team lead(s) by a certain date. Using this approach, the Team lead(s) were then responsible for compiling results from individual Team members to create a final completed survey representing the entire team.
2. Team Leads could conduct a Goal Team meeting or conference call, at/during which all team members will collectively contribute to completing one survey for the entire Goal Team.

In each Goal Team Objective Progress Survey, team members were asked to answer several questions using different types of response categories (Table 1). As a reference, see [Appendix B](#) for one Goal Team Objective Progress Survey. Team Leads submitted completed surveys via email to Jennifer Woody, who then forwarded surveys to the UNC Team.

UNC Team members summarized results by calculating basic frequency distributions for each survey question, and by listing (verbatim) narrative responses to open-ended questions.

Table 1. Goal Team Objective Progress Summary Survey Items, Types of Data, and Data Analysis Summary.

Survey Item	Type of Data	Analysis
1. Rate to what extent they have made progress in completing strategic plan <u>objectives</u> and to rate how important it is to complete each objective by 2014.	Likert-Scales: 1 to 5: (1= none, 5= complete) 1 to 5: (1= not at all, 5= extremely)	Frequency Distribution
2. Rate to what extent they have made progress in completing strategic plan <u>progress check evaluation measures</u> and to rate how important it is to complete each progress check evaluation measure by 2014.	Likert-Scales: 1 to 5: (1= none, 5= complete) 1 to 5: (1=not at all, 5= extremely)	Frequency Distribution
3. Rate to what extent changing five components about Goal Teams (<i>e.g., membership, leadership, funding to support objectives, collaboration with other Teams, revising/ updating team objectives</i>) will enhance the team’s ability to meet its <u>current or to-be revised</u> strategic plan objectives If a component was rated ‘4-somewhat’ to ‘5-extremely’, Teams were asked to share their comments about changes that may be needed for team in the short-term.	Likert-Scale: 1 to 5: (1=not at all, 5= extremely) Qualitative/Open-ended	Frequency Distribution Verbatim Comments
4. List recommendations or observations they have about <u>how their Goal Team Meetings</u> could be changed/modified to help their team meet its current or to-be revised objectives (<i>e.g., meeting frequency; processes used to initiate, plan, and conduct meetings; templates used to summarize/communicate results/progress to other Team members and/or the IVP-SAC</i>).	Qualitative/Open-ended	Verbatim comments
5. List recommendations or observations they have about <u>how the IVP-SAC</u> could be changed/modified to help their team meet its current or to-be revised objectives (<i>e.g., its leadership, membership, meeting frequency, meeting processes, communication to IVP-SAC members from IVP-SAC leadership</i>).	Qualitative/Open-ended	Verbatim comments
6. Describe if they know of existing strategic plans related to the work of their goal team and if so, whether those plans could be used to inform their team’s objectives and help align work across the state. They were also asked to provide a website of where a copy could be obtained.	Multiple Choice: <i>Yes, No, or Maybe</i> Qualitative/Open-ended	Verbatim comments

RESULTS

Each Goal Team (n=10) completed one overall objective progress survey. The Goal Teams used a variety of methods to obtain input from team members to complete survey responses (Table 2).

Table 2. Methods Used to Complete Goal Team Progress Surveys.

Goal Teams	Method by which Goal Team Objective Progress Survey Completed
GT1. Data & Surveillance	The team lead emailed survey to group and then one lead combined responses. Both leads had a call to review and collate responses for final submission.
GT2. Research & Evaluation	At the time of the survey, the team only had one member. The survey was completed by that member.
GT3. Messaging, Pol., & Envr. Change	The team met in person to review the survey and discussed the answers as a group. All permanent team members were present, as well as some of the ad-hoc members.
GT4A. Saving Lives-MVCs	This team never actually formed or met, but does have a lead identified. The lead filled out the survey.
GT4B. Saving Lives-Falls	A portion of the team met in person and two joined the discussion via phone to discuss the answers for the survey. Responses were agreed upon as a group.
GT4C. Saving Lives-Poisoning	The team lead emailed the survey to the group then combined responses. The team lead collated responses into single survey that was then approved by the co-lead and then submitted.
GT4D. Saving Lives-Violence/Assault	The team met in person to review the survey and discussed the answers as a group. All permanent team members were present.
GT4E. Saving Lives-Suicide	The team is in the process of reforming with new members so the current lead reviewed the goals that related to the Garrett Lee Smith grant and measured the success based on the Youth Suicide Prevention Program's accomplishments. The other goal's status and interests were collected at meetings of the Triangle Consortium for Suicide Prevention.
GT5. Building the IP Community	The team lead sent the survey team members, who completed the survey independently and the team leader compiled the results. Four of the six team members completed the survey.
GT6. Workforce Development	Some Team members met in person, others on the phone to discuss the survey. Two members completed the survey individually and the team lead compiled all answers before submitting.

Goal Teams were asked to rate to what extent they have made progress in completing strategic plan objectives, and to rate how important it is to complete each objective by 2014. A summary of the responses to these two questions is provided in Table 3. The number of objectives for each Goal Team varied (from 1 to 6) with a total of 32 objectives in the IVP Strategic Plan.

Goal Teams were also asked to rate to what extent they have made progress in completing strategic plan progress check evaluation measures, and to rate how important it is to complete each progress check evaluation measure by 2014. A summary of the responses to these two questions is provided in Table 4. The number of progress check evaluation measures for each Goal Team varied (from 3 to 9) with a total of 46 progress check evaluation measures in the IVP Strategic Plan.

NC IVP 2009-2014 Strategic Plan Review Project Final Report
 Appendix A: Goal Team Objectives Progress Survey Summary

Table 3. Goal Team Objectives Frequency Distribution: Summary of Completion Status and Importance Rating.

GOAL TEAMS	N	Objective Progress					Importance of Completing Objectives by 2014					
		None	A Little	Adequate	A Lot	Complete	Not at All	A Little	Somewhat	Very	Extremely	n/a
GT1. Data & Surveillance	4		25%	25%		50%				50%		50%
GT2. Research & Evaluation	3		100%							66%	33%	
GT3. Messaging, Pol., & Envr. Change	3		33%	33%		33%		33%	33%		33%	
GT4A. Saving Lives-MVCs	1		100%								100%	
GT4B. Saving Lives-Falls	2				50%	50%					100%	
GT4C. Saving Lives-Poisoning	2			50%	50%						100%	
GT4D. Saving Lives-Violence/Assault	3	33%	33%	33%				66%			33%	
GT4E. Saving Lives-Suicide	4		25%	25%	25%	25%		25%			50%	25%
GT5. Building the IP Community	6		17%	33%	33%	17%		17%	33%	33%	17%	
GT6. Workforce Development	4		50%		50%			25%	25%		50%	
TOTAL	32	3%	34%	22%	22%	19%	0%	6%	19%	19%	44%	13%

Table 4. Goal Team Progress Check Evaluation Measures Frequency Distribution: Summary of Completion Status and Importance Rating.

GOAL TEAMS	N	Progress Check Evaluation Measure Progress					Importance of Completing Progress Check Evaluation Measures by 2014					
		None	A Little	Adequate	A Lot	Complete	Not at All	A Little	Somewhat	Very	Extremely	n/a
GT1. Data & Surveillance	3	66%				33%					66%	33%
GT2. Research & Evaluation	9	89%				11%		22%	22%	11%	45%	
GT3. Messaging, Pol & Envr. Change	4		25%		25%	50%		25%		75%		
GT4A. Saving Lives-MVCs	3	66%	33%					33%	66%			
GT4B. Saving Lives-Falls	6	17%		17%	51%	17%		17%	50%	33%		
GT4C. Saving Lives-Poisoning	4		25%	50%	25%			25%	50%	25%		
GT4D. Saving Lives-Violence/Assault	3	100%								33%	66%	
GT4E. Saving Lives-Suicide	5		40%		40%	20%		20%		60%	20%	
GT5. Building the IP Community	5			40%	40%	20%		20%	40%	20%	20%	
GT6. Workforce Development	4		50%	25%	25%				50%	50%		
TOTAL	46	35%	15%	13%	22%	15%	0%	2%	15%	35%	28%	20%

Goal Teams were asked to rate to what extent changing five components of the Goal Teams (e.g., membership, leadership, funding, collaboration, revising objectives) would enhance the team’s ability to meet its current or to-be revised strategic plan objectives. A summary of the frequency distribution of responses to these five elements, by Goal Team, shown in Table 5.

Table 5. Degree to which Changing Goal Team Components Will Enhance Meeting Objectives, by Goal Team.

Team Component	Not at all	A Little	Somewhat	Very	Extremely	Legend
A. Goal Team Membership		20% 1, 4C	30% 4B, 4D, 5	30% 2, 3, 6	20% 4A, 4E	Goal Teams Legend 1. Data & Surveillance 2. Research & Evaluation 3. Messaging, Policy & Envr. Change 4A. Saving Lives-MVCs 4B. Saving Lives-Falls 4C. Saving Lives-Poisoning 4D. Saving Lives-Violence/ Assault 4E. Saving Lives-Suicide 5. Building the IP Community 6. Workforce Development
B. Goal Team Leadership	20% 5, 6	40% 1, 4B, 4C, 4D	20% 3, 4E		20% 2, 4A	
C. Funding to support Team objectives		40% 3, 4A, 4E, 5	20% 1, 4B	20% 4C, 4D	20% 2, 6	
D. Collaboration or overlap with other Teams		10% 6	30% 1, 2, 4A	40% 4B, 4C, 4D, 4E	20% 3, 5	
E. Revising or updating our Team’s objectives			20% 1, 4C	40% 2, 4E, 5, 6	40% 3, 4A, 4B, 4D	

If a component was rated ‘somewhat’ to ‘extremely’, Teams were asked to share their comments about changes that may be needed for team in the short-term. A summary of comments related to the five elements is provided in Table 6.

Table 6. Comments about Goal Team Changes That May Be Needed to Meet Objectives.

Team	Comments (specific ideas or suggestions to improve):
A. Goal Team Membership	<ul style="list-style-type: none"> • May want to pull in some of the identified sources GT1 • Lost a team member, will we be replacing? GT1 • Have ad hoc members for specific data needs GT1 • Need active membership. GT2 • Include more non-state employees. Consider AARP or similar rep. GT3 • Add people who are able to advocate, perhaps just on the SAC, not on this group. Another option, rely more on topic experts/external allies who serve on other teams, i.e. Fred in poisoning. We need strong partnership but understand that it is likely to be fluid and issue specific. However, we want to expand the base of folks who understand the connection between their work and interests and various IVP topics. GT3 • This goal team is not active and needs to be revitalized GT4A • It’s fine, as is though we would like a non state employee to lead if they were interested/passionate. GT4B • We must include as many agencies as possible. The problem affects everyone and there is normally more ideas out of a larger group. GT4C • This group had ebbs and tides. Really only recently started to plan meetings and get more organized. GT4C • We got off to a slow start and all the key players changed. We wonder if the re-definition / refinement of goals would increase need for new membership GT4D • Members representing the military are interested in contributing to goal development; more networking will develop as the new GLS deliverables are addressed. A chapter of the American Foundation for Suicide Prevention may form in NC and may result in stronger suicide survivor services. GT4E • Identifying and adding goal team members is a good idea, especially for this group since it is about building the IP Community. GT5 • It would help to know the history of the committee more as to what was done in the past. Makes it easier to move forward. GT5 • There is a diverse group that brings various backgrounds and expertise to the table - believe we have already identified ways to balance and improve our membership without the committee becoming too large. GT6 • Additional members from across the state that represent the IVP/Trauma Community to help insure “buy-in” GT6 • A Kim Bailey or Shannon Barkwell should be added as a standing member. GT6

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Team	Comments (specific ideas or suggestions to improve):
B. Goal Team Leadership	<ul style="list-style-type: none"> • Any change in leadership could have an effect on plan objectives - GT1 • Current leadership is goal directed and focused on thru put of the end product. Keep them in place. GT1 • Need to think about long term rotation/ownership GT1 • Need co-chair! GT2 • Possibly get a co-chair. Current leadership is fine, but if someone very committed with both time and passion emerges we definitely want to be open to engaging them. GT3 • I'm not familiar with the leadership in the group. But I believe that this type of mission needs very strong leadership. GT4C • Mostly the right people. GT4C • May need co-leadership especially if there is greater emphasis on military/veterans. This is a special population with different procedures and policies. GT4E • The committee needs to meet and examine a new approach as to what we can do to improve the leadership and make it stronger, so we can move forward as a group in being a successful goal team. GT5
C. Funding to support Team objectives	<ul style="list-style-type: none"> • Could help with maintaining a website; working with local health depts., etc. GT1 • Funding may be needed for completed project; Funding would help produce more user friendly data inventory document and support efforts to promote use of the document; Funding will be helpful but there is still much to be done that doesn't need specific funding. GT1 • Funding did not create any barriers to completing current objectives but level could have been improved with additional funding GT1 • Maintenance of researcher database requires significant time to maintain, and thus needs funding. Also will need funding for support of evidence-based practices database, and for dissemination of info. GT2 • We will continue to do work without funding and look at what is possible with no money. If money becomes available we will expand our work. GT4B • We do have funding in a way in that Ellen Schneider is funded by the Carolinas Geriatric Education Center to lead the Coalition. GT4B • Could always use more funding and resources to have time to dedicate to this important issue. A: In this day it always comes down to the funding. We should look into every avenue for additional funding. GT4C • Do we have any funding to support media or educational campaigns? It seem like this is a piece of the overall picture that isn't being picked up by anyone else and that could be a good contribution for this group. GT4C • Lots to be done with or without funding GT4C • No funding to implement activities. Funds make things happen. It's also a matter of not having enough time. Time is a big barrier. GT4D • We hope as group in working together with other groups to further strengthen. GT5 • Funding would help with ability to move project forward GT6 • Funding could make an impact on the completion of our project GT6
D. Collaboration or overlap with other Teams	<ul style="list-style-type: none"> • There is overlap of objectives between teams. Collaboration of teams to prevent duplication of time, energy and funding. GT1 • Insight from data users GT1 • Need a formal way to share and exchange information GT1 • This is the core of what this group does. We rely on the expert groups to identify the problems and solutions. We need to examine how best to interact with other goal teams without creating undue time demands to any single team or member(s). At the same time, we need to figure out how to share our policy expertise in a helpful way with the other goal teams. GT3 • Support from policy and data could help. GT4A • Policy and data are the other teams we see most potential with. GT4B • Workforce development may also be a good place to collaborate. GT4B • If there are other groups pursuing similar objectives then collaboration is essential. A: Not sure how this is accomplished at this time. GT4C • I don't have a sense of how much we are already doing this so can't speak to how much it needs to be changed. GT4C • We did not do such a good job in this area. GT4C • We need to be able to figure out ways to share back out collaborations. There was a more recent attempt on the part of the policy team to reach out and make implicit the support they can provide. GT4D • Policy development as it relates to suicide prevention legislation for youth. GT4E • Consider a formal mechanism for sharing work among various members. GT5

Team	Comments (specific ideas or suggestions to improve):
	<ul style="list-style-type: none"> • There is a connection that can be addressed in each team and this could be beneficial to our mission. GT6 • Some members have come on since the beginning of the project, an orientation of other teams and their progress at this point. GT6 • Establish a close collaboration with Goal Team 5 GT6
E. Revising or updating our Team's objectives	<ul style="list-style-type: none"> • Is there reason to revise objectives? Looks like we have completed many of them. GT1 • Depends on what revisions are made GT1 • Need the next generation of objectives to keep this Team focused GT1 • Need to revise evaluation measures, as some don't fit the focus of this team. GT2 • Need to review objectives to ensure that they are still the best mechanism for reaching our goals. GT2 • Definitely rethink/remove the 8 champions objective. Move more towards fluid champions depending on the issue we're addressing. Likely champions will be issue-specific rather than injury generalists. Consider including administrative issues as well as state policy objectives. Expand networks for regular communication with potential allies and partners. Re-strategize (perhaps) ways to effectively advance IVP objectives in changing times and tough economic environment. GT3 • Restate the types of policies we deal with: Not only state legislation, but also administrative changes and local policies as well. GT3 • Identify ways of pursuing policies outside of traditional structure of DPH. Create a plan for ongoing communications to support policy goals. GT3 • Revising the goals and objectives are essential. We have proposed focusing the team on leading the state to adopt Towards Zero Death. GT4A • The Coalition already worked on revising its objectives earlier this year and plans to finalize our 2012-2013 plan in early 2012. GT4B • One of our long term objectives from our first two year planning process was to create a complete 5-year plan, which we are still working on. GT4B • Yes – depending on what other groups are doing and how collaboration works out. A: Again I would need to see all the objectives. GT4C • These objectives were created really before the core team was gathered. GT4C • Need to make goals and activities more explicit. Need to be reworked and add a couple. GT4D • Accomplished training goals can now be shifted to other groups in line with GLS deliverables. Re-assessing whether community response teams will be feasible by 2014. GT4E • Some of the objectives are no longer necessary/feasible but other options have emerged to get a similar outcomes.(Like the list of IVP Stakeholders-we can look into using PH Connects instead of the DPH Website. GT5 • Data, trends and team goals and our primary focus will always have a need to be evaluated and an adjustment could be to our advantage. Do think we are on right track. GT6

Goal Teams were asked what recommendations or observations they have about how their Goal Team Meetings and about how the IVP-SAC could be changed/modified to help their team meet its current or to-be revised objectives. A summary of suggestions, by Goal Team, is provided in Table 7.

Table 7. Comments about Goal Team Changes and IVP-SAC Changes Potentially Needed to Meet Objectives.

Goal Team	How Goal Team Meetings Could Change	How the IVP-SAC Could be Changed/Modified
1. Data & Surveillance	<ul style="list-style-type: none"> • Maybe a document indicating where we are in the process? Minutes? • We have met when there was product to review or need for revisions. Conference calls are appreciated. • For the upcoming year come up with a standing meeting date and time so that members can block time and better ensure availability and participation of members • Current Membership met most of the goals and objectives. I would suggest continued efforts and members participation can only improve outcomes. 	<ul style="list-style-type: none"> • Possibly having an annual meeting where all goal team members have an opportunity to hear updates directly from each team. • I would suggest that inactive goal teams be combined with others or eliminated. I would also suggest the use of technology to facilitate workgroup mtgs.

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Goal Team	How Goal Team Meetings Could Change	How the IVP-SAC Could be Changed/Modified
2. Research & Evaluation	<ul style="list-style-type: none"> Need to meet more frequently. 	<ul style="list-style-type: none"> Assistance with location of funding for researcher database. Many of this team's objectives are on-going projects that will need constant updating. What will be the process for maintaining these items (e.g., researcher database, evidence-based prevention programs)?
3. Messaging, Policy & Envr. Change	<ul style="list-style-type: none"> To help us understand the policy needs of other groups, consider SAC Goal Team leads meet as their own group to discuss cross-cutting issues at least quarterly. In general, our goal team will meet in person or by phone quarterly, however, if there is no business at hand, meetings will be canceled. Perhaps invite representatives from other teams to our meetings to discuss their policy needs. Consider joint meetings with other goal teams for the quarterly meeting when appropriate??? 	<ul style="list-style-type: none"> Develop communications structures to exchange ideas across groups (perhaps PHconnect could be used www.phconnect.org) The group should seek non state employee members but keep to the size limit in its charter to maintain a workable group (25?) Consider adding time to the end of SAC meetings for goal team chairs to work together/exchange ideas. Provide refreshments at meetings to enable/encourage participants to stay longer.
4A. Saving Lives-MVCs	<ul style="list-style-type: none"> This team has not been real active. NC is doing a lot in MV injury but Public Health has not been a central player. DOT and law enforcement are currently central to the NC motor vehicle issue. We have struggled to join or adapt a current state-wide committee to connect to the SAC and have struggled to identify PH and the SAC with the DOT partners in the state. The fed DOT Towards Zero Death initiative appears to be a good venue to identify a role for the SAC team and PH. There is also a challenge in leadership for the group. 	<ul style="list-style-type: none"> We have developed a list of potential members of the team that represent constituents in NC working on MV injury. We need to start convening meetings and begin work.
4B. Saving Lives-Falls	<ul style="list-style-type: none"> Leadership/structural enhancements committee should revisit and revise our objectives at least once per year. Continue to have communications among the exec leadership team to plan our quarterly meetings. 	<ul style="list-style-type: none"> LHDs should have increased training around falls prevention, perhaps engage Paula Carden for this activity since she is a local health director on the SAC. Add additional LHDs to the SAC. SAC should gain an understanding of the trend/movement towards public health engaging with healthcare and how it relates to falls prevention work, and perhaps other injury prevention work, or conversely how it is not really a good fit.
4C. Saving Lives-Poisoning	<ul style="list-style-type: none"> No specific recommendations or observations other than making sure there is minimal duplication of effort if other groups have similar objectives. It seems like awareness of this issue is growing but I'm not sure how standardized the surveillance around this issue is and how all of the data around this issue can be better utilized and disseminated for NC in a timely manner. While I have not attended any meetings we have found that a regular meeting where specific goals and timelines are assigned usually help the process. Frequency of meetings should be increased; however, many 'meetings' could be accomplished through emails and conference calls. In person meetings are not always 	<ul style="list-style-type: none"> The most important next step will be a review and updating of objectives based on current standings. C: Better progress and results communication to the members. D: None

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Goal Team	How Goal Team Meetings Could Change	How the IVP-SAC Could be Changed/Modified
	<p>necessary.</p> <ul style="list-style-type: none"> • Meetings frequency and communicating progress reports to the members. • I don't know. I have just joined the group and have not yet attended a meeting. • Be more organized and find niche around communication, research and policy. 	
4D. Saving Lives-Violence/Assault	<ul style="list-style-type: none"> • When these objectives are fleshed out, we should put the objectives at the top of every agenda. 	<ul style="list-style-type: none"> • Some of the above changes, leadership, meeting process, have been changing. Good faith effort on the part of leadership to support goal teams. Would be good to figure out how goal team members can be a part of the SAC. There could be a small steering committee and then an open committee. Having a mechanism through which goal team members could contribute to overall conversation. Not sure if the goal team report form is the best feedback loop tool.
4E. Saving Lives-Suicide	<ul style="list-style-type: none"> • New members to reflect areas of interest and possible need for conference calls if stakeholders are identified in other areas of the state. Will be attempting to have one group address both IVP-SAC goals (across the age range) and state youth suicide prevention goals. 	<ul style="list-style-type: none"> • Larger meeting venues
5. Building the IP Community	<ul style="list-style-type: none"> • Observation- I very much appreciate the work of the IVP Branch. They provide direction for a core of injury prevention advocates across the state. The data and information has been very valuable. Six goal teams are a lot. • Having a project, like the upcoming conference in May 2012 is good for this group- gets us motivated. Leadership should ensure quarterly reports are filled out/submitted to the IVP Branch Staff. This will help us reflect progress and process as well as a record of what we need to do over time. • We need to conduct committee meetings or conference calls and take meeting minutes and formulate quarterly reports perhaps twice per year to IVP Branch. 	<ul style="list-style-type: none"> • Allotting more meeting time,(perhaps 3 hours instead of 2) would be a good idea.
6. Workforce Development	<ul style="list-style-type: none"> • I think it is a work in progress and is slowly moving in the right direction – the discussions and input from all members is good – may need to have a designated meeting date – so more members can be available to attend. • May need to increase frequency as the project moves along • Minutes are on time, a good division of labor between the chair and co chair. 	<ul style="list-style-type: none"> • Rotate members that attend • Group functions well, good, clear communications. In the future it would be helpful to not give an overview of injury at these meetings but an overview of what agency is doing as we meet at different member's organizations.

Goal Teams were asked if they knew of existing strategic plans related to the work of their goal team and if so, whether those plans could be used to inform their team’s objectives and help align work across the state. They were also asked to provide a website of where a copy could be obtained. Table 8 lists the responses, by Goal Team, related to relevant strategic plans.

Table 8. Existence of other plans that may inform Team objectives.

Goal Team	Yes	No	Did not Answer	Website/Notes
1. Data & Surveillance		X		
2. Research & Evaluation			X	
3. Messaging, Policy & Envr. Change	X			NC IOM, Healthy People 2020, State Sexual Violence Prevention Plan and State Domestic Violence Prevention Plan. We need some clarification around the SV and DV plans and how they may interact with policy. There is a highway safety annual plan. Also, consider more participation/gaining more understanding of DOT’s sustainability plan and how injury prevention policy may be bolstered. Child Fatality Taskforce’s agenda should inform this goal team’s work.
4A. Saving Lives-MVCs	X			NC DOT and Gov Highway Safety Office have state MV strategic plans.
4B. Saving Lives-Falls	X			NC’s State Aging Plan, Health North Carolina 2020, Triple Aim (Dr. Kate Queen of Western North Carolina). Would like to know if the hospital associations The division of health services regulation, community care of North Carolina, or the Carolinas Geriatric Education Center has any plans around falls prevention.
4C. Saving Lives-Poisoning			X	
4D. Saving Lives-Violence/Assault	X			DELTA, EMPOWER, NCCPCSA, NCCADV – CASE Project
4E. Saving Lives-Suicide	X			Saving Tomorrows Today http://www.injuryfreenc.ncdhhs.gov/About/YouthSuicidePreventionPlan.pdf
5. Building the IP Community	X			NC Plan for Preventing Sexual Violence: has objectives related to connecting various groups of professionals working on the issue which we may be able to tap into.
6. Workforce Development		X		

SUMMARY

Goal Teams have made some progress in completing objectives and progress check evaluation measures.

1. Two years into a five-year strategic plan (or 40% of plan's timeframe), approximately 41% of objectives and 37% of progress checks evaluation measures are either 'a lot' or 'fully' completed.
2. For 63% of objectives and 63% of progress check evaluation measures, Goal Teams feel it 'very' or 'extremely' important to complete them by 2014. They feel it 'extremely' important for 44% of objectives.

To complete current or revised strategic plan objectives, some changes in Goal Team processes (e.g., membership, collaboration with other teams, and revisions to goal team objectives) may be needed.

3. 50% of Goal Teams (n=5 of 10) report that **changing team membership** will be 'very' or 'extremely' important to help them meet their current or revised strategic plan objectives. Several comments about this included widening membership to non-state/agency employees from multiple disciplines or backgrounds.
4. Only 20% (n=2 of 10) of Goal Teams feel that **changing team leadership** 'extremely' important (no Teams rated it as 'very important') to help them meet their current or revised strategic plan objectives. Several teams commented on the importance of changing team leadership, with several noting the need for a co-chair to share leadership responsibilities.
5. 60% of Goal Teams (n=6 of 10) reported that **collaboration or overlap with other teams** would be 'very' or 'extremely' important to help them meet their current or revised strategic plan objectives. There seems to be some agreement that the GT1-Data and GT3-Policy have the most 'opportunity' to collaborate with other goal teams.
6. The majority (80%) of Goal Teams (n=8 of 10) report that **revising or updating their team's objectives** will be 'very' or 'extremely' important to help them meet their current or revised strategic plan objectives. Narrative comments support this, as well as revising process check evaluation measures.
7. Recommendations or observations about **Goal Team Meetings** generally focused on: frequency of meetings (several teams suggested a need to increase frequency); meeting facilitation (e.g., review objectives/evaluation measures at each meeting, have agendas, send/summarize minutes or progress reports); using technology to facilitate workgroup meetings; and considering 'joint' goal team meetings.
8. Recommendations or observations about the **IVP SAC** generally focused on: identifying opportunities for Goal Team leads to meet/discuss more formally at/during/following SAC meetings; identifying mechanism by which Goal Team members can be more involved with/aware of SAC happenings/decision-making.

For some Goal Teams, resources may be needed for goal teams to meet current or revised objectives, including funding and/or linkages to existing strategic plans.

9. 40% of Goal Teams (n=4 of 10) reported that **funding** would be 'very' or 'extremely' important to help them meet their current or revised strategic plan objectives. While funding would help many of the teams, it doesn't seem like it's required for them to meet objectives.
10. Six Goal Teams (60%) reported that existing or **other strategic plans** related to the work of their goal teams existed. While several examples were provided, only one website or contact information was provided to access the plans that were noted.

Goal Team 1: Data & Surveillance		
<i>Team Leads</i>	Scott Proescholdbell	Injury and Violence Prevention Branch
	Phillip Graham	RTI International
<i>Members</i>	Krista Ragan	Office of the Chief Medical Examiner & NC Child Fatality Prevention Team
	Tammy Norwood	Injury and Violence Prevention Branch
	Leigha Shepler	Moses Cone Health System
	Sharon Schiro	N.C. Institute of Medicine
	Theresa Cromling	SafeKids Durham County
Goal Team 2: Research & Evaluation		
<i>Team Leads</i>	Sharon Schiro	N.C. Institute of Medicine
	Steve Marshall	Injury Prevention Research Center at the University of North Carolina
<i>Members</i>	Janice Williams	Carolinas Medical Center
	Siobhan Davis	WakeMed
	Alan Dellapenna	Injury and Violence Prevention Branch
Goal Team 3: Messaging, Policy, and Environmental Change		
<i>Team Lead(s)</i>	Elizabeth Hudgins	NC Child Fatality Taskforce
<i>Members</i>	Jennifer Woody	Injury and Violence Prevention Branch
	Jan White	TBI/DD Prevention Program Coordinator, DMH/DD/SAS
	Julie Henry	NC Division of Public Health Public Information Officer
	Monika Johnson Hostler	North Carolina Coalition Against Sexual Assault
	Alan Dellapenna	Injury and Violence Prevention Branch
	Scott Proescholdbell	Injury and Violence Prevention Branch
	Sharon Rhyne	Chronic Disease and Injury Section
	Goal Team 4A: Saving Lives – Motor Vehicle Crashes	
<i>Team Lead(s)</i>	Alan Dellapenna	Injury and Violence Prevention Branch
<i>Members</i>	Cecilia Saloni	El Pueblo, Inc
	Sylvia Scholl	WakeMed Health & Hospitals
	Cliff Braam	NC Department of Transportation
	John Stokes	Governor’s Highway Safety Program Emeritus
	Don Nail	Governor’s Highway Safety Program
	Sukanto Biswas	Wake Med
	Paul Glover/Fritz	NC Division of Public Health Forensic Tests for Alcohol Branch
	Bill Hall	UNC Highway Safety Research Center
	TBD	Students Against Destructive Behaviors
<i>Ad Hoc</i>	Craig Lloyd	MADD North Carolina office
	Herb Garrison	NC State Highway Patrol/ECU
Goal Team 4B: Saving Lives – Falls		
<i>Team Lead</i>	Sharon Rhyne	NC Division of Public Health Chronic Disease and Injury Prevention Section
<i>Members</i>	Jennifer Woody	Injury and Violence Prevention Branch
	Tiffany Shubert	Carolinas Geriatric Education Center
	Lori Schrodtt	Western Carolina University
	Rebecca Hunter	Environmental and Policy Change Project of the Healthy Aging Network
	Ellen Schneider	UNC Institute on Aging
	Leslie Allison	Eastern Carolina University
	Audrey Edmisten	NC Division of Aging and Adult Services
	NC Falls Prevention Coal.	All coalition members

Goal Team 4C: Saving Lives – Poisoning		
<i>Team Lead</i>	Marsha Ford	Carolinas Poison Center
<i>Members</i>	Scott Proescholdbell	Injury and Violence Prevention Branch
	Bill Bronson	Controlled Substances Reporting System
	James Bowman/ Donnie Varnell	State Bureau of Investigations
	Katherine Harmon	Injury and Violence Prevention Branch
	Kay Sanford	Project Lazarus
	Jerry McKee	NC Community Cares
	Lana Deyneka	NC DETECT
<i>Ad Hoc</i>	Amy Ising	NC DETECT
	Tim Whitmore	NC State Center for Health Statistics
	Glenda Adams	Division of Medical Assistance, Pharmacy Section
	Mariana Garretson	UNC IPRC
	Fed Brason	Pro Lazarus
Goal Team 4D: Saving Lives – Violence/Assault		
<i>Team Lead(s)</i>	Leah Perkinson	NC Coalition Against Domestic Violence
	Catherine Guerrero	Injury and Violence Prevention Branch
<i>Members</i>	Scott Proescholdbell	Injury and Violence Prevention Branch
<i>To be invited</i>	Jennifer Przewoznik	NC Coalition Against Sexual Assault
Goal Team 4E: Saving Lives – Suicide		
<i>Team Lead(s)</i>	Jane Miller	Injury and Violence Prevention Branch
<i>Members</i>	Sherry Lehman	Injury and Violence Prevention Branch
	Melanie Turner	Injury and Violence Prevention Branch
Goal Team 5: Building the IP Community		
<i>Team Lead(s)</i>	Kelly Ransdell	Safe Kids/Office of State Fire Marshall
	Kimberly Bailey	Injury Prevention Coordinator, Duke University Hospital
<i>Members</i>	Jennifer Woody	Injury and Violence Prevention Branch
	Amy Hamilton	FirstHealth of the Carolinas
	Shannon Barkwell	Injury Prevention Coordinator, UNC Hospitals
	Jennifer Smith	Eastern Carolina Injury Prevention Program/Pitt County Memorial Hospital
	Mike Barringer	Cleveland Regional Medical Center
Goal Team 6: Workforce Development		
<i>Team Lead(s)</i>	Stephania Sidberry	Injury and Violence Prevention Branch
	Mariana Garretson	UNC Injury Prevention Research Center
<i>Members</i>	Jan Parker	Office of the State Fire Marshal
	Susanne C. LeDoyen	Wake County Human Services
<i>Ad Hoc/Liaison to Team 5</i>	Alan Dellapenna	Injury and Violence Prevention Branch

GOTAL TEAM 1: Data & Surveillance

Goal: Increase the use of injury and violence data through a comprehensive, coordinated injury surveillance system that is accurate, readily available and sustainable, and that is used to guide injury and violence prevention programs and policies at the local, regional and state level.

Membership and Survey Participation (please place an X in the column near your name to identify yourself as a survey respondent; please also note any changes to membership in this table):

Team Leads	Scott Proescholdbell	Injury and Violence Prevention Branch
	Phillip Graham	RTI International
Members	Krista Ragan	Office of the Chief Medical Examiner & NC Child Fatality Prevention Team
	Tammy Norwood	Injury and Violence Prevention Branch
	Leigha Shepler	Moses Cone Health System
	Sharon Schiro	N.C. Institute of Medicine
	Theresa Cromling	SafeKids Durham County

Instructions:

This instrument was developed to help your Goal Team members assess progress in meeting strategic plan objectives, as well as to identify factors that may contribute to your Goal Team making future progress. Following instructions provided to you by your Goal Team Lead(s), please complete parts I-IV of this survey. Goal Team members may be asked by Goal Team Lead(s) to first complete the survey on an individual basis. If so, Goal Team lead(s) will determine a method to aggregate results (e.g., during a call or meeting of the Goal Team) to submit one overall survey reflecting results for the entire Goal Team. Your Goal Team Lead(s) will use these results to provide input when s/he or they attend the December 15, 2011 IVP-SAC meeting and the January 19, 2012 IVP-SAC retreat.

Part I

A. Please rate the following about your Goal Team Objectives and Progress Check Evaluation Measures:

1. The **Degree of Progress** you feel your Team has made from 2009-2011 (green columns)
2. How **Important** it is that your Goal Team complete each by 2014 (orange columns).

Notes: a) select 'not applicable' in the orange columns if your Goal Team has completed the objective; b) the action steps originally developed for your Goal Team's objective are included, for reference, on page 4 of this survey instrument.

GT1. Objectives	Degree of Progress in Meeting Objective					How important is it to complete this by 2014?						
	No ne	A Little	Adequ ate	A Lot	Comp lete	Not al All	A Little	Some what	Ver y	Extrem ely	Not applica ble	
A. Convene the Data Goal Team for the State Strategic Plan to address gaps in existing data/data systems (by 09/09).	1	2	3	4	5	1	2	3	4	5	n/a	
B. Conduct an assessment of existing data sources that contain injury and violence prevention information, and create a data source list to post on the DPH IVPB website. The assessment will outline data source information, such as who compiles and analyzes the data and when new data are available each year. The assessment will identify data needs not met by existing sources (by 8/10).	1	2	3	4	5	1	2	3	4	5	n/a	
C. Complete a Data Goal Team report with plans for closing data gaps, and methods for utilizing existing data to guide injury and violence prevention programs and policies at the state, regional and local levels (by 03/11).	1	2	3	4	5	1	2	3	4	5	n/a	

GT1. Objectives	Degree of Progress in Meeting Objective					How important is it to complete this by 2014?					
	No ne	A Little	Adequ ate	A Lot	Comp lete	Not al All	A Little	Some what	Ver y	Extreme ly	Not applica ble
D. Collaborate with the Coordination and Constituency Goal Team to determine how to best use data at the state and local level (by 03/12).	1	2	3	4	5	1	2	3	4	5	n/a

GT1. Progress Check Evaluation Measures	Degree of Progress in Meeting Objective					How important is it to complete this by 2014?					
	No ne	A Little	Adequ ate	A Lot	Comp lete	Not al All	A Little	Some what	Ver y	Extreme ly	Not applica ble
1. Data inventory document is created and posted to web.	1	2	3	4	5	1	2	3	4	5	n/a
2. Report is created with recommendations on data needs in these areas.	1	2	3	4	5	1	2	3	4	5	n/a
3. NC Community IVP Data Uses and Needs report has been submitted for review to the IVP-SAC.	1	2	3	4	5	1	2	3	4	5	n/a

Part II

B. In column 1 below, we list key components of your Goal Team. **Please rate to what extent changing each component will enhance your Goal Team’s ability to meet its current or to-be revised strategic plan objectives.** If you rate a component ‘somewhat’ to ‘extremely’, please share your comments (in column 7) about if/what changes may be needed for your team in the short-term.

	Not at all	A Little	Somew hat	Very	Extre mely	Comments (specific ideas or suggestions to improve):
A. Goal Team Membership	1	2	3	4	5	
B. Goal Team Leadership	1	2	3	4	5	
C. Funding to support Team objectives	1	2	3	4	5	
D. Collaboration or overlap with other Teams	1	2	3	4	5	
E. Revising or updating our Team’s objectives	1	2	3	4	5	

Part III

C. What recommendations or observations do you have about how your Goal Team Meetings could be changed/modified to help you meet your current or to-be-revised objectives (e.g., meeting frequency; processes used to initiate, plan and conduct meetings; templates used to summarize/communicate results/progress to other Team members and/or the IVP-SAC)?

D. What recommendations or observations do you have about how the IVP-SAC could be changed/modified to help your team meet your current or to-be revised objectives (e.g., its leadership, membership, meeting frequency, meeting processes, communication to IVP-SAC members from IVP-SAC leadership)?

Part IV

E. Do you know of existing strategic plans related to the work of your goal team? If so, Could those plans be used to inform your team’s objectives and help align work across the state?

Yes No Maybe/Unknown

If yes, please provide plan name and where/how IVP-SAC can obtain a copy (e.g., web address):

Objectives and Action Steps as they appear in the Strategic Plan are listed here for your reference:

GT1. Objectives & Action Steps	
A. Convene the Data Goal Team for the State Strategic Plan to address gaps in existing data and data systems (by 09/09).	
1.	Identify partners to participate on the Data Goal Team, such as Action For Children, Law Enforcement, State Bureau of Investigation, Maternal and Child Health, the Governor’s Highway Safety Program, the Office of the Chief Medical Examiner, the State Center for Health Statistics, Trauma RACs, Safe Kids, the Office of Healthy Carolinians, the North Carolina Office on Disability and Health, the Office of Juvenile Justice and Delinquency Prevention, Office of State Fire Marshal. Identify other partners by emailing stakeholders list from April 27 Strategic Planning Meeting.
2.	Send out a save-the-date invitation to identified data stakeholders for a September 2009 meeting.
3.	Work to plan a data stakeholders meeting.
4.	Hold meeting of Data Goal Team. Participants will come to the meeting with a one-page summary of their programs and avail. data.
5.	Assign meeting participants task of developing a list of data sources that includes relevant information about the data sources to be determined by the Data Goal Team.
6.	At meeting, develop subcommittees to handle special projects, the first being creation of the data inventory.
B. Conduct an assessment of existing data sources that contain injury and violence prevention information, and create a data source list to post on the DPH IVPB website. The assessment will outline data source information, such as who compiles and analyzes the data and when new data are available each year. The assessment will identify data needs not met by existing sources (by 8/10).	
1.	Review existing data resource list from the DPH IVPB to develop a tool and process for IVP data resource collection.
2.	Submit data resources inventory to N.C. DPH Public Affairs Office for review and approval.
3.	Compile the data resources inventory and disseminate list to stakeholders group.
C. Complete a Data Goal Team report with plans for closing data gaps, and methods for utilizing existing data to guide injury and violence prevention programs and policies at the state, regional and local levels (by 03/11).	
1.	Evaluate data resource list to determine existing gaps in data and conduct focus groups to better understand needs in the five priority risk areas.
2.	Analyze information from focus groups and create a report with recommendations on data needs in these areas.
3.	Submit draft State of Injury and Violence Prevention Data report for review to the IVP-SAC.
D. Collaborate with the Coordination and Constituency Goal Team to determine how to best use data at the state and local level (by 03/12).	
1.	Evaluate data resource list to determine existing gaps in data and conduct focus groups to better understand needs in five priority risk areas.
2.	Analyze information from focus groups and create a report with recommendations on data needs in these areas.
3.	Submit draft North Carolina Community Injury and Violence Prevention Data Uses and Needs report for review to the IVP-SAC

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 Appendix B: January 19, 2012 IVP-SAC Retreat Attendees^a

<i>First Name</i>	<i>Last Name</i>	<i>Organizational Affiliation</i>
Goal Team 1: Data and Surveillance		
1. Theresa	Cromling	SafeKids Durham County
2. Phil	Graham	RTI International
3. Tammy	Norwood	Injury and Violence Prevention Branch
4. Krista	Ragan	Office of the Chief Medical Examiner & NC Child Fatality Prevention Team
5. Sharon	Schiro	N.C. Institute of Medicine
6. Leigha	Shelper	Moses Cone Health System
Goal Team 3: Messaging, Policy, and Environmental Change		
7. Michael	Eisen	Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
8. Elizabeth	Hudgins	NC Child Fatality Taskforce
9. Monika	Johnson-Hostler	North Carolina Coalition Against Sexual Assault
10. Sharon	Rhyne	Chronic Disease and Injury Section
11. Jan	White	TBI/DD Prevention Program Coordinator, DMH/DD/SAS
Goal Team 4A: Saving Lives – Motor Vehicle Crashes		
12. Sukanto	Biswas	Wake Med
13. Cliff	Braam	NC Department of Transportation
14. Lynda	Carroll	Johnson County (JOCO Teen Drivers)
15. Alan	Dellapenna	Injury and Violence Prevention Branch
16. Arthur	Goodwin	UNC Highway Safety Research Center
17. Steve	Marshall	UNC Injury Prevention Research Center
18. Jennifer	Smith	Eastern Carolina Injury Prevention Program/Pitt County Memorial Hospital
Goal Team 4C: Saving Lives – Unintentional Poisonings		
19. Fred	Brason	Project Lazarus
20. Annie	Demuth	Council of State and Territorial Epidemiologist Fellow
21. Lana	Deyneka	NC Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT)
22. Amy	Ising	NC Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT)
23. Scott	Proescholdbell	Injury and Violence Prevention Branch
24. Kay	Sanford	Project Lazarus
Goal Team 4D: Saving Lives – Violence/Assault		
25. Catherine	Guerrero	Injury and Violence Prevention Branch
26. Catherine	Joyner	NC Child Maltreatment Leadership Team
27. Leah	Perkinson	NC Coalition Against Domestic Violence
28. Virginia	Pirrello	NC Department of Juvenile Justice and Delinquency Prevention
29. Jennifer	Przewoznik	NC Coalition Against Sexual Assault
30. Meghan	Shanahan	Wake County Child Maltreatment Surveillance System
Goal Team 4E: Saving Lives -- Suicide		
31. Jodi	Flick	UNC School of Social Work
32. Jane	Miller	Injury and Violence Prevention Branch
33. Susan	Robinson	Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
Goal Team 5: Building the Injury Prevention Community		
34. Kim	Bailey	Injury Prevention Coordinator, Duke University Hospital
35. Shannon	Barkwell	Injury Prevention Coordinator, UNC Hospitals
36. Paula	Carden	Jackson County Health Department
37. Siobhan	Davis	WakeMed
38. Jan	Parker	Office of the State Fire Marshal
39. Jennifer	Woody	Injury and Violence Prevention Branch

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<i>First Name</i>	<i>Last Name</i>	<i>Organizational Affiliation</i>
Goal Team 6: Workforce Development		
40. Suzanne	LeDoyen	Wake County Human Services
41. Mariana	Garrettson	UNC Injury Prevention Research Center
42. Liz	Knight	UNC Injury Prevention Research Center
43. Stephania	Sidberry	Injury and Violence Prevention Branch

^a The members of *Goal Team 4: Saving Lives—Falls* did not formally attend the Retreat (due to scheduling conflicts). However, Jennifer Woody from the Injury and Violence Prevention Branch, who was involved with the planning of the retreat and is a Goal Team 4 member, met with team members prior to and following the Retreat to follow procedures similar to those used at the retreat to revise the Goal Team’s objectives, action steps, and/or progress check evaluation measures.