

# Getting Ready for Male Services in Family Planning

**Assessing Your Systems, Services and Staff** 





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## **Assessment**

Assessment should take place before any changes are made. Assessment:

- offers feedback to staff, supervisors and administration on their present practices and changes in their practices over time;
- enhances readiness of staff for training and technical assistance; and
- prepares staff and the organization for implementation of changes.

## Tips for Successful Assessment and Implementation

- Implementing any major change including the assessment phase is best led by an interdisciplinary team, made up of representation from *all* levels of staff reception/clerks/support, clinical, health education, management.
- Individuals chosen for this team should exhibit the following characteristics: Enjoy the respect of their colleagues and peers; Be seen as leaders, even if they're not in official leadership positions; Have excellent communication skills; Show willingness to self-reflect and self-assess and to make changes; Practice critical thinking skills; Have a positive attitude.
- The team using these tools must foster a safe environment for assessments and
  discussions. Staff should be assured that any input provided will not be used to judge
  individuals or agency departments. A staff's responses on any assessment should not
  have any adverse effects on that staff person or employment. All assessment materials
  should be secured in a safe location, e.g., locked file cabinets at research agency
  offices.
- Top management must show support for the assessment, changes recommended and for the team by guaranteeing the interdisciplinary team time to meet and work together; the amount of time will vary from agency to agency
- Top management must show support for the change by communicating *positively* to the entire staff.
- The entire staff must be involved in the change, through opportunities to share their concerns as well as ideas.

## **Environmental Assessment**

This checklist should be completed by an interdisciplinary team, made up of representation from *all* levels of staff – reception/clerks/support, clinical, health education, management.

The environmental assessment has two parts. The first part focuses on the agency as a whole, or, if you are part of a much-larger agency, such as a health department, this part could focus on your overall division or area in which you are positioned.

The second part addresses specific clinic site's environments. If you only have one clinic, complete both parts. If you have multiple clinics, complete the first part, then use the second part with each clinic site that wants to improve/increase male services.

## Part One—Agency

In your agency's **clinic sites**, which types of visits are available for male clients? [Circle all that apply.]

a. Annual exams e. Birth control education/counseling

b. STD/STI screening f. Medical revisits

c. Athletic physicals g. Infertility counseling/services

d. Sexual health counseling and services h. Other: \_\_\_\_\_

Note: Please answer the following questions specific to *male reproductive health and family planning services* (RH/FP)

Organizational Support	YES	NO
Does the agency's (or department's) mission focus on female clients?	$\mathbf{Y}$	$\mathbf{N}$
Does the agency's literature and website reflect serving male RH/FP clients?		N
Protocols, Policies and Procedures		
Have agency procedures been assessed to determine if they are inclusive of men and male RH/FP services?	Y	N
Do intake and other clinic data forms include items related to male RH/FP clients?	Y	N
Do chart materials include items related to male RH/FP clients, e.g., graphics of male and female genitals?		N
Do staff performance evaluations include assessment of male RH/FP service delivery?	Y	N
Are there protocols for male RH/FP services?	Y	N

Does your new employee orientation include male RH/FP client services issues?	Y	N
Do your agency protocols specifically promote male friendliness?	Y	N
Do your protocols encourage staff to promote male services to female clients?	Y	N
Is there a protocol for in-reach with existing clients to expand services to men?	Y	N
Is there a protocol for communicating with couples who show up for FP/RH services?	Y	N
Is there a protocol for communicating with men who are not clients but who escort their partners to the clinic for services?	Y	N
Do clinical services operate under the responsibility of (or have access to) a clinician with experience or training in male RH/FP services?	Y	N
Do you have a policy describing male RH/FP services?	Y	N
Do job descriptions state expectations regarding staff provision of male RH/FP services?	Y	N

Grantee/agency name:	
Stantee, agency name.	

## Part Two—Clinic Sites

Clinic Site Name:

Physical Environment	YES	NO
Is the reception area free of signs or posters that are negative toward men?	Y	N
Are positive images of and messages about men displayed in the clinic?	Y	N
Are positive images of and messages about women displayed in the clinic?	Y	N
Are services provided in a confidential and private setting?	Y	N
Does the clinic offer male-specific hours?	Y	N
Does the clinic offer male RH/FP services in a separate setting from where women receive RH/FP services?	Y	N
Does the clinic offer male RH/FP services in the same areas where women receive RH/FP services?	Y	N
Are RH/FP male and female clients seen in the same physical clinic area during the same block of time?		N
Programs and Services	YES	NO
Are educational materials provided to promote and support men's RH/FP health?	Y	N
Is information about community resources and referrals available for male RH/FP clients?	Y	N
Is information about community resources for males accessible to all clients – male and female?	Y	N
Are there resources specific to males in your community referrals list?	Y	N
Are services regularly evaluated to ensure they are meeting male clients' needs?	Y	N
Does the clinic have a referral system for care beyond the scope of this project?	Y	N

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How will you increase your ability to see more male clients? [Check all that app	lv.1	
Increase number of staff	J . 1	
Increase staff hours		
Increase clinic hours		
Increase space in clinic (exam rooms, etc.)		
Increase overall efficiency		
Other:		
Staff/Volunteers		
Are staff observed and provided feedback about their work with male clients?	Yes	No
Do you have male staff?	Yes	No
If yes, in what roles? [Check all that apply.		
Clinician		
Health educator (in the clinic)		
Community health educator, outreach worker		
Support staff, i.e., reception, cashier, etc.		
Administration/management		
Other:		

## **Environmental Assessment Results**

## Instructions

The interdisciplinary team should complete one clinic site reviewed.	results page for Part One –Agency and one for each
Clinic site:	Date Completed: / /
Interdisciplinary team members:	
Findings	
List below the most significant findings (Ah-ha r critical observations.	moments) from assessment. Include both positive and
Ideas	
List below the ideas that the team and staff offered	ed for improvement.

## **Staff Discussion Guide**

Use this discussion guide to learn from your staff how you can better serve males in your clinic. If your staff is too large to involve everyone, choose representatives from all areas of the clinic.

This discussion guide is best used by an experienced facilitator from outside the agency. Places to find such a person could include a local university, your regional family planning training center, local or state health department, or a volunteer agency in your community.

The reason for this is to help staff feel more comfortable sharing their thoughts, concerns and ideas that they might hesitate to share with a staff person. If it isn't possible to find someone outside the agency, it will be very important for the staff person leading this to assure the group of confidentiality.

## **Leading the Discussion Group**

**Facilitation:** The moderator who conducts a group meeting must encourage interaction and solicit honest responses, while also keeping the group on task. Effective moderators use group facilitation and communication skills, especially in establishing rapport, asking open-ended and follow-up questions. The moderator should:

- Use open-ended questions; avoid yes/no questions.
- Use probing follow-up questions: "What influenced your answer?" or "Please say more about that."
- Encourage alternative points of view: "Does anyone feel differently?" or "What are some other points of view?"

**Notetaking:** In addition to a moderator or facilitator, you'll need someone else to take notes. A note taker must be very skilled in capturing what participants actually say, as well as summarizing when appropriate.

**Resources:** Conducting the discussion group doesn't have to be expensive, complicated or time-consuming. The greatest resource you'll invest will be staff time to plan for, conduct and follow up on what you learn from the group. Additional resources include paper and pens for the note taker(s), (or a laptop computer if you have one), possibly a tape recorder and tapes, a comfortable private space, preferably in a neutral location, and some simple incentives (food and soft drinks).

## **Staff Input: Male Services in Title X Clinics**

Discussion Guide #
Location and date:
Number of Participants:
Moderator:
Observer/note taker:
Γype of staff:

## Introduction

(Moderator: you may want to read the sentences in quotations as they are written)

- Introduction of moderator and note taker
- Welcome and thank the staff
- Objective of the meeting: "Since our clinic will be offering/improving reproductive health services to men, we are interested in hearing your suggestions and recommendations on how to effectively conduct outreach and in-reach to promote male services."
- Confidentiality: "Everything we talk about today is confidential and will not be discussed outside of this meeting. No one's name will appear in any written summaries we will prepare from the information you provide. We will be talking for approximately one hour. If there is any part of the discussion you do not wish to participate in, you do not have to. If there is anything you say that you would prefer not be used in written summaries, please let me know and I will make sure to exclude that information."
- Optional: Tape recorder: "The opinion of each one of you is very important to us. We will be taking notes; however, it will not be possible to take notes of everything that is said. Therefore, we have brought a tape recorder so that we won't miss any part of the conversation. Is it alright with you if we use the tape recorder?"

If they say "yes," turn on tape recorder and re-state "you have given us permission to record this conversation, right?"

## Ask probing questions about:

#### Vision

#### Probe:

• How well male reproductive health/family planning services fit into this agency's vision and mission.

#### Environment

#### Probe:

- The physical environment, clinic hours and staff.
- Experience serving males in the clinic.
- Future hopes and concerns.

#### Outreach

[Define outreach with the group: Outreach means going out into the community working with community members, and working with other community organizations, to promote your services for males.]

## Probe:

- Current outreach successes and challenges.
- Who target population and how is that defined.
- Promotional message and media outlets.
- Partners and collaborators.
- Future hopes and concerns.

#### In-reach

[Define in-reach with the group: In-reach is when your clients, staff, board members and other programs tell their male friends, family, clients and partners about the clinic and service.]

#### Probe:

- Current successes and challenges.
- Who which staff should/could do in-reach.
- Future hopes and concerns.

## **Training**

#### Probe:

- Staff skills and readiness to change environment and conduct outreach and in-reach.
- Training required to successfully change the environment and conduct outreach and in-reach.

## Thank the group for their participation and ideas

## Staff Discussion Results

## Instructions

The external facilitator and notetaker sho	ould complete one results page for each staff discussion.
Clinic site:	Date Completed: / /
Number and type of staff:	
Findings	
List below the most significant findings positive and critical comments without is	(Ah-ha moments) from this group discussion. Include both dentifying any speakers.

## Ideas

List below the ideas that you and staff offered for improvement.

## **Family Planning Client Discussion Guides**

Use these discussion guides to learn from your clients how you can better serve males from your community in your clinic. Clients can include both *existing male and female clients* as well as *potential male clients* who use services in other community agencies. Therefore, there are three guides included, one for each type.

Each discussion guide can be useful for several reasons. First, it is useful to understand your clients' perception of the services they receive at your clinic. Secondly, it can be used to understand how to better attract potential male clients to use reproductive health services at your clinic. Ultimately the most important reason for using this guide is to effectively and efficiently provide comprehensive health and social services to young men in the community.

The discussion guides can be used by agency staff responsible for promotion, outreach and community education. They can be used when meeting one-on-one or in a group setting.

## **Leading the Discussion Group**

*Facilitation:* The staff person (moderator) who conducts a group meeting must encourage interaction and solicit honest responses, while also keeping the group on task. Effective moderators use group facilitation and communication skills, especially in establishing rapport, asking open-ended and follow-up questions. The moderator should:

- Use open-ended questions; avoid yes/no questions.
- Use probing follow-up questions: "What influenced your answer?" or "Please say more about that."
- Encourage alternative points of view: "Does anyone feel differently?" or "What are some other points of view?"

**Notetaking:** In addition to a moderator or facilitator, you'll need someone else to take notes. A note taker must be very skilled in capturing what participants actually say, as well as summarizing when appropriate.

**Resources:** Conducting the discussion group doesn't have to be expensive, complicated or time-consuming. The greatest resource you'll invest will be staff time to plan for, conduct and follow up on what you learn from the group. Additional resources include paper and pens for the note taker(s), (or a laptop computer if you have one), possibly a tape recorder and tapes, a comfortable private space, preferably in a neutral location, and some simple incentives (food and soft drinks).

*Key Terms*: reproductive health services include birth control; pregnancy tests, giving out condoms; STD/HIV testing, treatment and counseling; and physical exams.

## Male Clients' Input: Male Services in Title X Clinics

Client Discussion Guide #
Location and date:
Number of Participants:
Moderator:
Observer/note taker:
Type of staff:

## Introduction

(Moderator: you may want to read the sentences in quotations as they are written)

- Introduction of moderator and note taker
- Welcome and thank the participants
- Objective of the meeting: "Since our clinic will be offering/improving reproductive health services to men, we are interested in hearing your suggestions and recommendations on how to effectively conduct outreach and in-reach to promote male services."
- Confidentiality: "Everything we talk about today is confidential and will not be discussed outside of this meeting. No one's name will appear in any written summaries we will prepare from the information you provide. We will be talking for approximately one hour. If there is any part of the discussion you do not wish to participate in, you do not have to. If there is anything you say that you would prefer not be used in written summaries, please let me know and I will make sure to exclude that information."
- Optional: Tape recorder: "The opinion of each one of you is very important to us. We will be taking notes; however, it will not be possible to take notes of everything that is said. Therefore, we have brought a tape recorder so that we won't miss any part of the conversation. Is it alright with you if we use the tape recorder?"

If they say "yes," turn on tape recorder and re-state "you have given us permission to record this conversation, right?"

## **Male Clients**

## Ask probing questions about:

## **Service History**

#### Probe:

- How did you find out about this clinic?
- Where were you getting reproductive health services before?

## **Service Utilization**

## Probe:

• What services have you been using here at this clinic?

## **Experiences**

## Probe:

- What have been your experiences regarding the services you have used at this clinic (staff, confidentiality, etc)?
- What has worked well; what has not worked well?

## **Action Plan**

## Probe:

- What needs to be changed to enhance male reproductive health services in this clinic?
- How can we promote male services in this community?

Thank the group for their participation and ideas

## Male Clients' Input: Male Services in Title X Clinics Discussion Results

## Instructions

The facilitator and notetaker should complete one results page for each discussion with clinic male clients.
Date Completed: / /
Clinic Male clients:
Findings
List below the most significant findings (Ah-ha moments) from this group discussion. Include both positive and critical comments without identifying any speakers.

## Ideas

List below the ideas that you and staff offered for improvement.

## Female Clients Input: Male Services in Title X Clinics

Client Discussion Guide #	
Location and date:	
Number of Participants:	
Moderator:	
Observer/note taker:	
Type of staff:	

## Introduction

(Moderator: you may want to read the sentences in quotations as they are written)

- Introduction of moderator and note taker
- Welcome and thank the participants
- Objective of the meeting: "Since our clinic will be offering/improving reproductive health services to men, we are interested in hearing your suggestions and recommendations on how to effectively conduct outreach and in-reach to promote male services."
- Confidentiality: "Everything we talk about today is confidential and will not be discussed outside of this meeting. No one's name will appear in any written summaries we will prepare from the information you provide. We will be talking for approximately one hour. If there is any part of the discussion you do not wish to participate in, you do not have to. If there is anything you say that you would prefer not be used in written summaries, please let me know and I will make sure to exclude that information."
- Optional: Tape recorder: "The opinion of each one of you is very important to us. We will be taking notes; however, it will not be possible to take notes of everything that is said. Therefore, we have brought a tape recorder so that we won't miss any part of the conversation. Is it alright with you if we use the tape recorder?"

If they say "yes," turn on tape recorder and re-state "you have given us permission to record this conversation, right?"

## **Female Clients**

## Ask probing questions about:

#### Male Service

#### Probe:

• What is your opinion about men coming to this clinic to use reproductive health services? What are pros and cons?

## Male partners, male family members or male friends

#### Probe:

- What experiences have you had around your male partners, male family members or male friends using reproductive health services in this clinic.
- Have you referred any of your male partners, family members or male friends to this clinic? If yes, for what services?
- What do you think it would take for you to invite your male partners, male family members or male friends to come here for reproductive health services?

## **Experiences**

#### Probe:

- What have been your experiences regarding the services you have used at this clinic (staff, confidentiality, etc.)?
- What has worked well; what has not worked well?

## **Action Plan**

#### Probe:

- What needs to be changed to enhance male reproductive health services in this clinic?
- How can we promote male services in this community?

Thank the group for their participation and ideas

## Female Clients' Input: Male Services in Title X Clinics Discussion Results

## Instructions

The facilitator and notetaker should complete one results page for each discussion with clinic female clients.
Date Completed: / /
Clinic female clients:
Findings

List below the most significant findings (Ah-ha moments) from this group discussion. Include both positive and critical comments without identifying any speakers.

## Ideas

List below the ideas that you and staff offered for improvement.

## Potential Male Clients' Input: Male Services in Title X Clinics

Client Discussion Guide #	
Location and date:	
Number of Participants:	
Moderator:	
Observer/note taker:	
Type of staff:	

## Introduction

(Moderator: you may want to read the sentences in quotations as they are written)

- Introduction of moderator and note taker
- Welcome and thank the participants
- Objective of the meeting: "Since [name of clinic] will be offering/improving reproductive health services to men, we are interested in hearing your suggestions and recommendations on how to effectively conduct outreach and in-reach to promote male services."
- Confidentiality: "Everything we talk about today is confidential and will not be discussed outside of this meeting. No one's name will appear in any written summaries we will prepare from the information you provide. We will be talking for approximately one hour. If there is any part of the discussion you do not wish to participate in, you do not have to. If there is anything you say that you would prefer not be used in written summaries, please let me know and I will make sure to exclude that information."
- Optional: Tape recorder: "The opinion of each one of you is very important to us. We will be taking notes; however, it will not be possible to take notes of everything that is said. Therefore, we have brought a tape recorder so that we won't miss any part of the conversation. Is it alright with you if we use the tape recorder?"

If they say "yes," turn on tape recorder and re-state "you have given us permission to record this conversation, right?"

## **Potential Male Clients**

## Ask probing questions about:

## **Service History**

#### Probe:

- Where do men get information about health, and specifically reproductive health?
- Where do men go for health or reproductive health services in this community?

#### **Service Utilization**

## Probe:

- What kinds of services do they use at these places?
- Do men in this community have any concerns about STDs?

## **Experiences**

## Probe:

- What do you hear about men's experiences regarding the services they use at these places?
- What works well; what does not work well?

## **Action Plan**

## Probe:

- What kinds of changes would it take to have men in this community use the reproductive health services in [name of clinic]?
- How can we promote male services in this community?

Thank the group for their participation and ideas

## Potential Male Clients' Input: Male Services in Title X Clinics Discussion Results

## Instructions

Findings
Potential Male clients:
Date Completed: / /
The facilitator and notetaker should complete one results page for each discussion with potential male clients.

List below the most significant findings (Ah-ha moments) from this group discussion. Include both positive and critical comments without identifying any speakers.

## Ideas

List below the ideas that you and staff offered for improvement.

## **Outreach Assessment**

Agency:		 	
Team members:	<u> </u>		
Clinic site:			

This checklist should be completed by members of your community education/outreach team.

NOTE: You may need to complete an outreach assessment for each clinic, rather than the agency overall. That will depend based on how your outreach and community education practices and policies are structured.

	YES	NO
Has a needs assessment been completed to plan outreach activities for men?	Y	N
Do you have formalized community partnerships to promote and provide reproductive health/family planning (RH/FP) services to men?	Y	N
Do you have a written plan to ask female clients to encourage male partners, friends and family to use clinic services?	Y	N
Do you have a formal outreach plan to promote RH/FP male services?	Y	N
Do you have promotional materials to promote RH/FP male services?	Y	N
Do you have a distribution plan for your promotional materials?	Y	N
Does your outreach plan target males and females to promote RH/FP male services?	Y	N
Are you a part of a coalition/network where you can promote male RH/FP services?	Y	N
Do staff regularly meet with other organizations to promote male RH/FP services?	Y	N

## **Outreach Assessment Results**

# 

List below the ideas that the team and staff offered for improvement.

Ideas

## So What? Now What?

Based on your "results" pages from completing the Male Services Environmental Assessment, Staff Discussion Guide, Client Discussion Guide, or Male Services Outreach Assessment, as well as other sources of input, such as Clinic Efficiency activities/studies, Client Satisfaction Surveys, etc., use the following as a guide to make changes to improve/increase your male reproductive health services.

## **General Assessment Findings**

Ideas to address		
If you learned Ideas to address  Vision, Resources, Policies		
Explore options for rewriting vision		
Establish ad-hoc work group to rewrite vision		
Develop male-specific vision and/or mission statements with team/site if rewriting vision statement for agency not viable option		
Identify which specific resource(s) —eg., staff, money, supplies, equipment, time—is lacking and solicit staff input for creative ways to address		
Revise policies, procedures, forms to be inclusive of males		
Update medical protocols		
Communicate and/ or provide in-service on new policies and procedures to staff		
Implement new procedures, protocols, forms		
Explore ideas offered on results pages from assessment tools:		
<ul><li>Which are most likely to resolve the issues?</li><li>Which are most viable?</li></ul>		
Which do you need additional support/resources to accomplish?		

## **General Assessment Findings Worksheet**

Identify up to five priorities. For each, complete the following:

Priority #1	
Activity:	
Person(s)	
responsible	
Timeframe	
Measure of	
success	
Priority #2	
Activity:	
Person(s)	
responsible	
Timeframe	
Measure of	
success	
Priority #3	
Activity:	
Person(s)	
responsible Timeframe	
Timeframe	
Measure of	
success	
Priority #4	
Activity:	
Person(s)	
responsible	
Timeframe	
Measure of	
success	
Priority #5	
Activity:	
Person(s)	
responsible	
Timeframe	
Measure of	
success	

## **Environmental Assessment Findings**

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## **Environmental Assessment Findings Worksheet**

Identify up to five priorities. For each, complete the following:

Environmental Priority #1		
Activity:	·	
Person(s)		
responsible		
Timeframe		
Measure of		
success		
Environmental	Priority #2	
Activity:		
Person(s)		
responsible		
Timeframe		
Measure of		
success		
Environmental	Priority #3	
Activity:		
Person(s)		
responsible		
Timeframe		
Measure of		
success		
Environmental	Priority #4	
Activity:		
Person(s)		
responsible		
Timeframe		
Measure of		
success		
Environmental	Priority #5	
Activity:		
Person(s)		
responsible		
Timeframe		
Maria		
Measure of		
success		

## Community Partnerships/Outreach/In-reach Assessment Findings

If you learned	What to Do/How to do it
Community partners lack incentives to refer to clinic	Invite partners' ideas about meaningful incentives
	Provide incentives
No formal relationship between/among partners	Consider creating a Memorandum of Agreement signed by both parties, delineating roles and expectations (even if no monetary relationship)
Issues/concerns identified under "ah-ha moments" on Staff/Client Discussion Guide results pages	<ul> <li>Explore ideas offered on results pages:</li> <li>Which are most likely to resolve the issues?</li> <li>Which are most viable?</li> <li>Which do you need additional support/resources to accomplish?</li> </ul>
Community partners are unclear about why they should refer males to your family planning program	Share data and resources about men and family planning.  Consider conducting a needs assessment and share findings.
Community partners do not collaborate beyond their service delivery specialty	Establish a broad-based coalition of providers who routinely target males.  Establish routine meeting times, roles and potential functions of each partner.
Community partners are unaware of your services	Review/update promotional materials; consider adding key referral sites.  Conduct an in-service with their staff, or arrange for key staff to visit your clinic

## **Outreach/In-reach Assessment Findings Worksheet**

Identify up to five priorities. For each, complete the following:

Outreach/In-reach Priority #1			
Activity:			
Person(s)			
responsible			
Timeframe			
Measure of			
success			
Outreach/In-rea	ch Priority #2		
Activity:			
Person(s)			
responsible			
Timeframe			
Measure of			
success			
Outreach/In-rea	ch Priority #3		
Activity:			
Person(s)			
responsible			
Timeframe			
Measure of			
success			
Outreach/In-rea	ch Priority #4		
Activity:			
Person(s)			
responsible			
Timeframe			
Measure of			
success			
Outreach/In-rea	ch Priority #5		
Activity:			
Person(s)			
responsible			
Timeframe			
Measure of			
success			

## **Staff/Training Assessment Findings**

If you learned	What to Do/How to do it
Staff lack skills or knowledge essential for the job	Provide training  • Assign exemplary staff to train/coach others  • Obtain external training
Supervisors lack skills or knowledge to mentor, coach, provide feedback and training	Provide supervisor training  • Assign exemplary staff to train/coach others  • Obtain external training
Issues/concerns identified under "ah-ha moments" on Staff Discussion Guide results pages	<ul> <li>Explore ideas offered on results pages:</li> <li>Which are most likely to resolve the issues?</li> <li>Which are most viable?</li> <li>Which do you need additional support/resources to accomplish?</li> </ul>
Issues/concerns identified via client satisfaction activities	<ul> <li>Discuss issues with staff and solicit their input on how to address</li> <li>Ask other family planning clinics how they've resolved similar issues</li> </ul>
Training needs identified on training needs assessment or through other means	<ul> <li>Ask your RTC to provide training, either onsite or via annual meetings, webinars, audioconferences, etc.</li> <li>Seek training from other training sources, including: online training, other federal training centers (HIV, STDs, TB, etc.)</li> </ul>

## **Staff/Training Assessment Findings Worksheet**

Identify up to five priorities. For each, complete the following:

Staff/Training Priority #1	
Activity:	
Person(s)	
responsible	
Timeframe	
Measure of	
success	
Staff/Training P	riority #2
Activity:	·
Person(s)	
responsible	
Timeframe	
Measure of	
success	
Staff/Training P	riority #3
Activity:	
Person(s)	
responsible	
Timeframe	
Measure of	
success	
Staff/Training P	riority #4
Activity:	
Person(s)	
responsible	
Timeframe	
Measure of	
success	
Staff/Training P	riority #5
Activity:	•
Person(s)	
responsible Timeframe	
Measure of	
success	

