

**Department of Administration
Purchasing Division**

**Finance & Personnel Committee Approval Required
For Single / Sole Source Contract
Contract #E12942-A**

Background:

User Department:	Fire
Purchasing Agent:	Angelique M Pettigrew
Contract Description:	VSC – Online Distributing Learning for EMT & Paramedics
Vendor Name and Location:	Target Solutions Learning, LLC in Tampa Florida
Contract Term:	Three (3) years, from Jan. 1, 2014 through Dec. 31, 2016, with two (2) options to renew for one (1) additional year upon mutual agreement
Requisition # and Date Received:	14696 (05/12/16)
Original Contract Amount:	\$130,000.00
Expenditures to Date:	\$42,707.25
Current Contract Amount:	\$87,292.75

If Amendment, History of Contract Amendments:

Date	Item	Term	Cost
01/15/2014	Original Contract – Vendor Service Contract (VSC E12942) for online educational distributive learning courses, for a contract term of two (2) years, from 01/01/2014 to 12/31/2016, with two (2) additional options to renew for one (1) year. Approved by F&P Committee on 01/15/2014	01/01/2014 to 12/31/2016	\$130,000.00
09/05/2014	Amendment 1 – Effective 10/31/2014, assign VSC E12942, in its entirety, from Centrelearn Solutions (Assignor) to the Critical Information Network, LLC (Assignee). TKN remains the same.	01/01/2014 to 12/31/2016	0.00
05/20/2015	Amendment 2 – Effective 04/21/2015, change vendor’s name from Critical Information Network, LLC to TargetSolutions, (new vendor number) and transfer the remaining balance of \$87,292.75 from VSC E12942 to VSC E12942-A.	05/18/2015 to 12/31/2016	N/A
Pending	Amendment 3 – exercise the first (1 st) of two (2) options to renew the contract for one (1) additional year, from 12/31/2016 to 12/31/2017; and, increase the estimated contract value by \$45,000.00, from \$87,292.75 to \$132,292.75 , to cover anticipated expenditures during the renewal period.	01/01/2016 to 12/31/2017	\$45,000.00
Total (including the pending amendment)			\$132,292.75

Purpose of Contract/Amendment:

The purpose of this amendment is to exercise the first (1st) of two (2) options to renew the VSC, E12942-A, for one (1) additional year, from 12/31/2016 to 12/31/2017; and, increase the estimated contract value by \$45,000.00, from 87,292.75 to \$132,292.75, to cover anticipated expenditures during the renewal period.

Background:

The members of the Milwaukee Fire Department are required to maintain Emergency Medical Technician (EMT) or paramedic licenses (e.g., OSHA, BLS, ALS, HAZMAT Awareness and Operations modules) as a condition of their employment. In order to fulfill the requirements for those licenses, required training and educational content are hosted and distributed through a web interface using Target Solutions as the platform. Throughout each two (2) year licensing period, eight hundred thirty-five (835) MFD members are required to complete distributive learning modules, and pass on-line exams on content pertinent to maintaining their EMT licenses.

This platform allows complete monitoring and tracking of individual progress, while keeping records of completion on each individual. This on-line web based model allows all members easy access to required training and education through any computer, tablet or phone device. The current two (2) year licensing period through the State of WI ends 6/30/2016. All members have successfully completed the training and education requirements utilizing the Target Solutions platform to allow for their EMT licenses to be renewed.

City Purchasing Director

Date

**Department of Administration
Purchasing Division**

**Finance & Personnel Committee Approval Required
For Single / Sole Source Contract
Contract #E14634**

Background:

User Department:	Milwaukee Health Department (MHD)
Purchasing Agent:	Catina Slocum
Contract Description:	VSC for Marketing and Advertising Services for the Strong Baby Campaign
Vendor Name and Location:	Serve Inc. (Milwaukee, WI)
Contract Term:	5/2/2016 through 9/30/2016
Requisition # and Date Received:	Requisition #14634, Received 4/18/2016
Original Contract Amount:	\$161,000.00 (GRANT-FUNDED)
Expenditures to Date:	\$121,000.00
Current Contract Amount:	\$161,000.00

If Amendment, History of Contract Amendments:

Date	Item	Term	Cost
5/18/2016	Original Contract - VSC for Marketing and Advertising Services for the Strong Baby Campaign Approved by F&P Committee on: 5/18/2016	5/2/2016 through 9/30/2016	\$161,000.00
Pending	Amendment #1: Extend the contract term from 10/1/2016 through 7/31/2017 to coincide with additional grant funding received. Increase the estimated contract total by \$13,000.00 from \$161,000.00 to \$174,000.00.	10/1/2016 through 7/31/2017	\$13,000.00
Total (including the pending amendment)			\$174,000.00

Purpose of Contract/Amendment:

The purpose of this contract amendment is for the MHD to continue to receive Marketing and Advertising Services from Serve Inc. (a non-profit advertising agency) to advance a Strong Baby Campaign as part of the city-wide collaborative effort to reduce infant mortality rates. The MHD's Men's Health Program has been awarded additional funding that goes through 7/31/2017 to implement a smoking cessation program. The additional funds will be put towards a strong baby image about smoking cessation. This project is called Smoke Free Homes for Strong Babies. This amendment will extend the contract term one (1) year from 10/1/2016 through 7/31/2017 (to coincide with additional grant funding received) and increase the estimated contract total by \$13,000.00 from \$161,000.00 to \$174,000.00.

Background:

As part of funding through the State of Wisconsin Department of Children and Families, the MHD was approved to work with Serve Inc. to create a Strong Baby Campaign supporting the MHD's home visiting programs. The Strong Baby Campaign is proprietary to Serve Inc., who first created and developed the campaign (first launched in 2011). This campaign was designed to engage the community in the crucial conversation around changing the conditions that can lead to stronger babies and help reduce Milwaukee's infant mortality rate. It is a comprehensive community awareness campaign for evidence-based nurse home visitation programs in the City of Milwaukee. Through the Strong Baby Campaign, the MHD is hoping to normalize home visiting in Milwaukee through positive, proactive communication and marketing efforts that result in greater awareness of home visiting programs in Milwaukee, improved perception of home visiting programs and increased referrals and retention of clients within home visiting programs. A portion of the grant funding that MHD has received will be used to evaluate the impacts of the Strong Baby Campaign on reducing infant mortality. Along with the vendor, MHD will partner with the UW-Milwaukee School of Social Work to do pre and post-campaign evaluations.

Smoke Free Homes for Strong Babies is the City of Milwaukee Health Department's smoking cessation program which uses the Freedom from Smoking curriculum. The MHD is doing this as part of their effort to reduce the city's infant mortality rate by lowering their exposure to second hand smoke. Another aspect of the program is to improve indoor air quality to reduce chronic disease (i.e. asthma, cancer, etc.) in men and women. The program is offered to both residents and non-residents of the City of Milwaukee. Classes will be conducted until July 2017 by Men's Health program staff that is trained by the American Lung Association.

City Purchasing Director

Date

**Department of Administration
Purchasing Division**

**Finance & Personnel Committee Approval Required
For Single / Sole Source Contract
Contract #E14649**

Background:

User Department:	Milwaukee Health Department (MHD)
Purchasing Agent:	Catina Slocum
Contract Description:	VSC Community Health Improvement Planning Consulting Services
Vendor Name and Location:	Ujima United, LLC (Sun Prairie, WI)
Contract Term:	9/1/2016 through 8/31/2017 w/ option to extend upon mutual consent
Requisition # and Date Received:	Requisition #14807, Received 8/23/16
Original Contract Amount:	\$23,600.00 (GRANT-FUNDED)
Expenditures to Date:	\$22,150.00
Current Contract Amount:	\$23,600.00

If Amendment, History of Contract Amendments:

Date	Item	Term	Cost
5/25/2016	Original Contract – VSC Community Health Improvement Planning Consulting Services	5/1/2016 through 8/31/2016	\$23,600.00
Pending	Amendment #1: Extend the contract term one (1) year from 9/1/2016 through 8/31/2017 and increase the estimated contract total by \$35,600.00 from \$23,600.00 to \$59,200.00 to cover expenditures during the contract extension.	9/1/2016 through 8/31/2017	\$35,600.00
Total (including the pending amendment)			\$59,200.00

Purpose of Contract/Amendment:

The purpose of this amendment is for the MHD to continue work on the Community Health Improvement Planning (CHIP) process with Ujima United, LLC whose objective is to facilitate a CHIP process that aligns with Public Health Accreditation Board (PHAB) standards. This work will continue through this next contract cycle, with the end result being a written Community Health Improvement Plan. This amendment will extend the contract term one (1) year from 9/1/2016 through 8/31/2017 and increase the estimated contract total by \$35,600.00 from \$23,600.00 to \$59,200.00 to cover expenditures during the contract extension.

Background:

Ujima United, LLC has extensive experience working on CHIPs and other projects to prepare local and state health departments for nationally recognized public health accreditation. This specific project is the last step to complete three (3) prerequisites for accreditation (See Exhibit #1 – Vendor’s Proposal). Some of the vendor’s duties include: having meetings with key stakeholders to identify factors that are occurring or might occur that affect the health of the community or the local public health system, attending multiple existing community events with a focus on engaging under-represented populations, forming task forces based on the identified priority focus areas, implementing an ongoing monitoring system to evaluate both the process and outcomes of the CHIP and establishing an agreed upon method for ongoing engagement with the community.

City Purchasing Director

Date

UJIMA UNITED, LLC PROPOSAL FOR SERVICES



OVERVIEW

Ujima United, LLC is pleased to submit this proposal for services to support the City of Milwaukee Health Department in achieving its vision.

Vision of the City of Milwaukee Health Department

The City of Milwaukee Health Department is a leader in assuring that Milwaukee is the healthiest city in the nation, with the best personal health care, environmental health, and population-based preventive services possible.

Because the health of the individual and health of the community are interdependent, we work in partnership with private providers and others to guarantee access to health care, to safeguard the environment, and to provide up-to-date health information using the latest available technology to monitor and assess community health.

The City of Milwaukee Health Department is in the forefront of public health and strives to meet the changing needs of our community. Our services respond directly to these needs and are delivered in a way which is fully respectful of the rights and dignity of each client in order to promote a partnership with them to achieve and maintain health.

Our ability to serve our clients successfully results from individual and team efforts of the entire staff, who recognize and value each member's unique skills and diversity.

OBJECTIVE

To facilitate a Community Health Improvement Planning (CHIP) process that aligns with Public Health Accreditation Board (PHAB) standards. Specifically:

- Analyze Public Health Data to Identify Trends in Health Problems, Environmental Public Health Hazards, and Social and Economic Factors that Affect the Public's Health (Standard 1.3)
- Provide and Use the Results of Health Data Analysis to Develop Recommendations Regarding Public Health Policy, Processes, Programs, or Interventions (Standard 1.4)
- Engage with the Public Health System and the Community in Identifying and Addressing Health Problems through Collaborative Processes (Standard 4.1)
- Promote the Community's Understanding of and Support for Policies and Strategies that will Improve the Public's Health (Standard 4.2)
- Conduct a Comprehensive Planning Process Resulting in a Community Health Improvement Plan (Standard 5.2)

EVALUATING SUCCESS

A successful CHIP process will:

- Engage and promote collaboration among a broad group of diverse community stakeholders throughout the process
- Recognize that various factors influence health, including health behaviors, healthcare, social and economic factors, and the physical environment
- Identify a set of shared priority community health issues to address
- Leverage best practices and evidenced-based implementation strategies
- Result in the development of a detailed action plan that aligns with state and national priorities
- Assure continuous quality improvement through ongoing process and outcome evaluation methods
- Inspire collective impact efforts to achieve significant and lasting change
- Ultimately, improve the health of the community and promote health equity

QUALIFICATIONS

Ujima United, LLC serves as a partner for change, providing a wide range of professional consulting services to individuals, organizations and communities. Additional information can be found online at: www.UjimaUnitedLLC.com.

For this project, Kim Whitmore will serve as the lead consultant. Ms. Whitmore has had more than 15 years of public health experience working with communities at both the local and state level. As the Health Officer for the City of Cudahy Health Department, she established the Healthiest Cudahy Coalition and led the community health assessment (CHA) and community health improvement planning (CHIP) process. As the State Health Plan Officer for the Wisconsin Division of Public Health, she was responsible for the monitoring and evaluation of Healthiest Wisconsin 2020. She worked closely with the Public Health Council to develop a process to prioritize the focus areas and better align with Public Health Accreditation Board (PHAB) standards. Ms. Whitmore also worked closely with the State Innovation Model (SIM) initiative to help align diverse stakeholders across Wisconsin to improve population health. She has broad public and private sector experience with meeting facilitation, strategic planning, and coalition building, as well. In her current position as the Director of the Graduate Health Systems Management Program at Loyola University Chicago, she helps to cultivate the next generation of healthcare leaders who will transform the healthcare system and communities to promote health equity and society justice. As a member of the faculty, she teaches Health Policy and Health Program Planning and Evaluation to an interprofessional group of students from nursing, public health, medicine, and social work. With her diverse experience and training, Ms. Whitmore is uniquely positioned to help support this important work for the City of Milwaukee Health Department.

STRATEGY

Our strategy incorporates proven methodologies, extremely qualified personnel, and a highly responsive approach to managing deliverables. Following is a proposed timeline of key project activities. Dates are best-guess estimates and are subject to change until a contract is executed.

<i>Activity</i>	<i>Timeline</i>	<i>Description</i>
Disseminate Community Health Assessment Results	September 2016	Broadly disseminate the results of the Community Health Assessment through press releases, website, social media, and targeted messaging to key stakeholders
Themes and Strengths Assessment	September 2016	Social media photo campaign to solicit the voice of the community
Forces of Change Assessment	September 2016	Meetings with key stakeholders to identify factors that are occurring or might occur that affect the health of the community or the local public health system
Priority Issues Survey	September 2016	Survey of key stakeholders and the broader community to identify priority issues impacting health
Community Engagement Events	September 2016	Attend multiple existing community events with a focus on engaging underrepresented populations. At the events, participants will be given a summary of key assessment results and will be asked to complete the priority issues survey.
Priority Selection Committee Finalizes Priority Issues	October 2016	Based on the input from the community, a committee will use pre-selected criteria to finalize the selection of the top 3-5 issues that need to be addressed in order to improve the health of the community.
Taskforce Meetings Based on Focus areas	November 2016 - February 2017	Taskforces will be formed based on the identified priority focus areas. The taskforce meetings will focus on: <ol style="list-style-type: none"> 1. Exploring the root causes of the problem and setting goals 2. Identifying current initiatives and resources 3. Proposing effective implementation strategies
Task Force Report Out Meeting	March 2017	Taskforces will report results of their work and solicit feedback from the larger community
Finalize and Disseminate Written Community Health Improvement Plan	April - May 2017	The final written community health improvement plan will be developed aligned with PHAB standards and measures and broadly disseminated to the community through press releases, website, social media, and targeted messaging to key stakeholders
Implement and continuously evaluate the plan	Ongoing	An ongoing monitoring system will be needed to evaluate both the process and outcomes of the plan

Maintain community engagement	Ongoing	An agreed upon method for continued engagement with the community will need to be established
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RESOURCES

The resources needed to successfully complete this project will vary based on the scope of work. Meeting expenses (i.e. room rental, set-up, food/beverages, supplies), advertising/marketing costs, website/social media development and printing/distribution costs of dissemination materials are the responsibility of the City of Milwaukee Health Department. Ujima United consulting fees will be determined based on the level of support needed throughout the process at the fixed rate of \$100 per hour. The consultation time required to complete each activity is a best estimate and may be subject to variability. Two options are presented for your consideration.

OPTION 2

Ujima United consultants will provide comprehensive project management over all activities in order to complete the final written community health improvement plan. Ujima United consultants will collaborate with program staff for all activities using a team-based approach to ensure successful and timely completion of all deliverables.

OPTION 2 BASE FEE (356 hours x \$100/hour) = \$35,600

SUMMARY

We look forward to working with the City of Milwaukee Health Department and supporting your efforts to improve the health of the community.

If you have questions related to this proposal, feel free to contact Kim Whitmore at your convenience by email at UjimaUnited@gmail.com or by phone at 414-403-2699.

Thank you for your consideration.

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[oo-GEE-mah]

*Collective work and
responsibility*



City of Milwaukee Health Department
 Community Health Improvement Planning (CHIP) Process Work Plan
**Updated 9-5-16*



Light grey highlight denotes completion

Activity: Disseminate Community Health Assessment Results			
Description: Broadly disseminate the results of the Community Health Assessment through press releases, website, social media, and targeted messaging to key stakeholders.			
Task	Timeline	Person Responsible	Measures
Determine key stakeholders via analysis	May-June 2016	Ujima United & MHD	List of key stakeholders
Determine best dissemination methods for key stakeholders	June 2016	Ujima United & MHD	Crosswalk of stakeholder and dissemination methods
Determine dissemination methods for broader community (e.g. website, newspaper, social media, etc.)	June 2016	Ujima United & MHD	List of all broad dissemination methods
Assess and determine foreign language translation needs	May 2016	Ujima United & MHD	List of language groups for key populations
Create messaging for the various media for key stakeholders and for	-June 2016	Ujima United & MHD	Language for press releases, language for website, slogans, hash
			Complete - Determined priority is Spanish for all communications. Will provide select materials in other languages, as resources allow.
			Complete

broader community				tags, language for translation for various language groups	
Disseminate CHA results via chosen media	July-September 2016	Ujima United & MHD	CHA results disseminated via various media	In action	

Activity: Themes and Strengths Assessment					
Description: Social media photo campaign to solicit the voice of the community through images and captions.					
Task	Timeline	Person Responsible	Measures	Progress	
Determine questions to elicit community feedback	May-June 2016	Ujima United & MHD	List of questions	Complete	
Create messaging, slogan for community engagement	June 2016	Ujima United & MHD	Language for campaign	Complete	
Determine engagement for linguistic groups	June 2016	MHD and Ujima United	Strategy for linguistic groups	Complete	
Launch campaign	Late June-Early July 2016	MHD and Ujima United	Campaign is active	Complete	
Promote campaign	July-September 30, 2016	MHD and Ujima United	Social media posts	In action	
Collect submissions	Late June-September 30, 2016	MHD and Ujima United	n/a	In action	
Analyze campaign results	October 2016	MHD and Ujima United	Campaign analysis	Beginning to look at results	
Create summary report from campaign analysis	October 2016	MHD and Ujima United	Results summarized	Outlined, waiting for final results at end of September 2016	

Activity: Forces of Change Assessment				
Description: Facilitation of forces of change assessment with key stakeholders to identify factors that are occurring or might occur that affect the health of the community or the local public health system.				
Task	Timeline	Person Responsible	Measures	Progress
Determine Stakeholders for assessment	May-June 2016	MHD	List of stakeholders	Complete Selected Directors Meeting and Operations Meeting as target venues, potential Common Council meeting as a stakeholder group, working out logistics
Develop presentation to guide forces of change assessment	July 2016	Ujima United & MHD	Survey active	Complete
Conduct Forces of Change Assessment with selected groups	October 2016	Ujima United	Survey analysis	Completed with Directors and Officers and Operations Team. Alderspersons - TBD
Create summary report	October 2016	MHD and Ujima United	Report created	

Activity: Priority Issues Survey				
Description: Online and paper survey of key stakeholders and the broader community to identify priority issues impacting health.				
Task	Timeline	Person Responsible	Measures	Progress
Determine stakeholders for survey	May-June 2016	Ujima United & MHD	List of stakeholders	Complete -- Decided to send to all stakeholders with tailored messages
Assess and determine	May 2016	MHD and Ujima United	List of language groups	Complete -- Identified

foreign language translation needs					for key populations	Spanish as priority
Determine dissemination methods for broader community (e.g. website, newspaper, social media, etc.)	June 2016	MHD and Ujima United		List of all broad dissemination methods	Complete	
Create online survey focused on eliciting priority issues (Seek IRB Approval)	May-June 2016	Ujima United		Survey created	Complete - Online and paper survey in English and Spanish	
Disseminate survey	Late June - September, 30 2016	MHD		Survey active	In action - to date almost 2150 surveys completed	
Analyze survey results	October 2016	Ujima United		Survey analysis	Beginning to review preliminary results	
Create summary report from analysis	October 2016	Ujima United		Report created		

Activity: Community Engagement Events						
Description: Attend scheduled list of existing community events with a focus on engaging underrepresented populations. At the events, participants will be given a summary of key assessment results and will be asked to complete the priority issues survey.						
Task	Timeline	Person Responsible	Measures	Progress		
Determine partnerships/venues for meeting	June 2016	MHD	List of partners/venues	Complete - will add additional events as time and resources allow.		
Select date, time, location for Community Engagement Events	July 2016	MHD	n/a	Complete - will add additional events as time and resources allow.		

Send invitation to partners using previously selected broad dissemination methods	July 2016	MHD and Ujima United	Broad dissemination	Complete – invitation to partners included in initial launch email and ongoing communications
Determine event format/objectives	July 2016	MHD & Ujima United	Event Summary Form	Complete
Create video with message from Commissioner	October 2016	Kane Communication Group	Completed video	
Create all handout and promotional materials for events and make sufficient copies for participants	July 2016	MHD & Ujima United	n/a	Complete Selected Frisbees and reusable grocery bags as incentives for completing survey. Also ordered stickers for the kids.
Attend Community Engagement Events	August and September 2016	MHD & Ujima United	Photos from Event uploaded into Box account and available upon request	In action, have attended events in all districts as well as major health fairs and other community events. 2-3 staffing each event and collecting survey results & delivery of incentives
Evaluate Events	August and September 2016	MHD & Ujima United	Event Summary Form for each event	In action

Activity: Taskforce Meetings Based on Focus areas Description: November 2016, January 2017 and February 2017 Taskforces will be formed based on the identified priority focus areas. These taskforces will meet over the course of three months and will focus on:				
1. Exploring the root causes of the problem and setting goals 2. Identifying current initiatives and resources 3. Proposing effective implementation strategies				
Task	Timeline	Person Responsible	Measures	Progress
Determine number of members for each task force team	October 2016	MHD & Ujima United	Decision regarding targeted numbers of team members for each taskforce	Beginning stages of planning
Develop list of members for each task force team (this should include self-selected members from the coalition meeting and solicited priority area experts)	October 2016	MHD & Ujima United	List of team members and contact information for each	Beginning stages of planning
Select date, time, and location for each task force meeting (November, January, and February)	October 2016	MHD & Ujima United	Scheduled meeting	
Create Save-the-Date and RSVP for each meeting	October 2016	MHD & Ujima United	Email and spreadsheet	
Send invite to task force members	October 2016 – February 2017	MHD & Ujima United	Emails sent to task force members	
Track responses of task force invitees	October 2016 – February 2017	MHD & Ujima United	List of confirmed attendees for each meeting	
Refine purpose of Meeting 1: Exploring root causes of the problem and setting	October 2016	MHD & Ujima United	List of meeting goals, objectives, and anticipated outcomes	

goals				
Create Agenda for Meeting 1	October 2016	MHD & Ujima United	Meeting agenda with activities designed to achieve goals, objectives and outcomes	
Determine meeting resource needs based on: 1. Number of attendees expected 2. Meeting activities planned 3. Facilitators 4. Meeting note-taker	October 2016	MHD & Ujima United	List of materials and resources needed for the meeting (e.g. food, technology, name tags, writing utensils, poster boards, reference documents, etc.	
Determine what elements meeting evaluation should assess (guided by meeting goals, objectives, and anticipated outcomes)	October 2016	MHD & Ujima United	List of themes focus areas evaluation should cover	
Create meeting evaluation	October 2016	MHD & Ujima United	Meeting evaluation with questions that assess defined themes and focus areas	
Final meeting preparation 1. Send last RSVP and confirmation notices to attendees 2. Review location space 3. Confirm speakers and resource needs 4. Put together all meeting	November 2016	MHD & Ujima United	Final email sent and confirmed attendee list. Communication with location about reserved space. Communication with	

materials and make sufficient copies				speakers and list of needs. Meeting materials are copied, presentations saved, etc.	
Hold task force meeting 1	November 2016	MHD & Ujima United		First meeting is hosted Meeting notes recorded	
Evaluate first task force meeting	November 2016	MHD & Ujima United		Evaluations are reviewed, analyzed and recommendations for improvement of next meetings made.	
Use evaluation results and meeting notes to begin planning task force meeting 2	December 2016	MHD & Ujima United			
Send invite to task force members (meeting 2)	October 2016 - January 2017	MHD		Emails sent to task force members	
Track responses of task force invitees (meeting 2)	October 2016 - January 2017	MHD		List of confirmed attendees for each meeting	
Refine purpose of Meeting 2: Identifying current initiatives and resources	December 2016	MHD & Ujima United		List of meeting goals, objectives, and anticipated outcomes	
Create Agenda for Meeting 2	December 2016	MHD & Ujima United		Meeting agenda with activities designed to achieve goals, objectives and outcomes	
Determine meeting resource needs based on:	December 2016	MHD & Ujima United		List of materials and resources needed for	

1. Number of attendees expected				
2. Meeting activities planned				the meeting (e.g. food, technology, name tags, writing utensils, poster boards, reference documents, etc.
Determine what elements meeting evaluation should assess (guided by meeting goals, objectives, and anticipated outcomes)	December 2016	MHD & Ujima United		List of themes and focus areas evaluation should cover
Create meeting evaluation	December 2016	MHD & Ujima United		Meeting evaluation with questions that assess defined themes and focus areas
Final meeting preparation	January 2016	MHD		Final email sent and confirmed attendee list.
1. Send last RSVP and confirmation notices to attendees				Communication with location about reserved space.
2. Review location space				Communication with speakers and list of needs.
3. Confirm speakers and resource needs				Meeting materials are copied, presentations saved, etc.
4. Put together all meeting materials and make sufficient copies				Second meeting is hosted
Hold task force meeting 2	January 2016	MHD & Ujima United		Meeting notes recorded

Evaluate second task force meeting	January 2017	MHD & Ujima United	Evaluations are reviewed, analyzed and recommendations for improvement of next meetings made.	
Use evaluation results and meeting notes to begin planning task force meeting 3	January 2017	MHD & Ujima United		
Send invite to task force members (meeting 3)	October 2016 – February 2017	MHD	Emails sent to task force members	
Track responses of task force invitees (meeting 3)	October 2016 – February 2017	MHD	List of confirmed attendees for each meeting	
Refine purpose of Meeting 3: Proposing effective implementation strategies	January 2017	MHD & Ujima United	List of meeting goals, objectives, and anticipated outcomes	
Create Agenda for Meeting 3	January 2017	MHD & Ujima United	Meeting agenda with activities designed to achieve goals, objectives and outcomes	
Determine meeting resource needs based on: 1. Number of attendees expected 2. Meeting activities planned	January 2017	MHD & Ujima United	List of materials and resources needed for the meeting (e.g. food, technology, name tags, writing utensils, poster boards, reference documents, etc.)	
Determine what elements meeting evaluation should assess (guided by meeting goals, objectives, and	January 2017	MHD & Ujima United	List of themes and focus areas evaluation should cover	

anticipated outcomes)				
Create meeting evaluation	January 2017	MHD & Ujima United	Meeting evaluation with questions that assess defined themes and focus areas	
Final meeting preparation 1. Send last RSVP and confirmation notices to attendees 2. Review location space 3. Confirm speakers and resource needs 4. Put together all meeting materials and make sufficient copies	February 2017	MHD & Ujima United	Final email sent and confirmed attendee list. Communication with location about reserved space. Communication with speakers and list of needs. Meeting materials are copied, presentations saved, etc.	
Hold task force meeting 3	February 2017	MHD & Ujima United	Third meeting is hosted Meeting notes recorded	
Evaluate third task force meeting	February 2017	MHD & Ujima United	Evaluations are reviewed, analyzed and recommendations for improvement of next meetings made.	
Use evaluation results and meeting notes to begin planning Community Coalition Report Out Meeting	February-March 2017	MHD & Ujima United		

Activity: Community Coalition Report Out Meeting			
Description: March 2017			
Taskforces will report results of their work and solicit feedback from the larger community			
Task	Timeline	Person Responsible	Measures
Review reports from each task force group and disseminate for public comment	Late February – Early March 2017	MHD & Ujima United	Draft reports reviewed and disseminated via various media
Select date, time, and location for CC report out meeting	January 2017	MHD & Ujima United	
Create Save-the-Date and RSVP for meeting	January 2017	MHD & Ujima United	
Send invite to task force members and broader community	January-March 2017	MHD & Ujima United	Emails sent to task force members and meeting information posted via various media
Track responses of community coalition report out invitees	Throughout January - March 2017	MHD & Ujima United	List of confirmed attendees for meeting
Refine purpose of Community Coalition Meeting	Late February - Early March 2017	MHD & Ujima United	List of meeting goals, objectives, and anticipated outcomes
Create Agenda for Meeting	Late February - Early March 2017	MHD & Ujima United	Meeting agenda with activities designed to achieve goals, objectives and

<p>Determine meeting resource needs based on:</p> <ol style="list-style-type: none"> 1. Number of attendees expected 2. Meeting activities planned 	<p>Late February - Early March 2017</p>	<p>MHD & Ujima United</p>	<p>outcomes List of materials and resources needed for the meeting (e.g. food, technology, name tags, writing utensils, poster boards, reference documents, etc.</p>	
<p>Determine what elements meeting evaluation should assess (guided by meeting goals, objectives, and anticipated outcomes)</p>	<p>Late February - Early March 2017</p>	<p>MHD & Ujima United</p>	<p>List of themes and focus areas evaluation should cover</p>	
<p>Create meeting evaluation</p>	<p>Late February - Early March 2017</p>	<p>MHD & Ujima United</p>	<p>Meeting evaluation with questions that assess defined themes and focus areas</p>	
<p>Final meeting preparation</p> <ol style="list-style-type: none"> 1. Send last RSVP and confirmation notices to attendees 2. Review location space 3. Confirm speakers and resource needs 4. Put together all meeting materials and make sufficient copies 	<p>March 2017</p>	<p>MHD & Ujima United</p>	<p>Final email sent and confirmed attendee list. Communication with location about reserved space. Communication with speakers and list of needs. Meeting materials are copied, presentations saved, etc.</p>	
<p>Hold community coalition report out meeting</p>	<p>March 2017</p>	<p>MHD & Ujima United</p>	<p>Community coalition meeting is hosted</p>	

Evaluate community coalition meeting	March 2017	MHD & Ujima United	Evaluations are reviewed, analyzed and recommendations for improvement of next meetings made.	
Review feedback received at coalition report out meeting and combine with comments received from other media solicitation for comment	March-Early April 2017	Ujima United	Summary report created.	

Activity: Finalize and Disseminate Written Community Health Improvement Plan				
Description: The final written community health improvement plan will be developed aligned with PHAB standards and measures and broadly disseminated to the community through press releases, website, social media, and targeted messaging to key stakeholders.				
Task	Timeline	Person Responsible	Measures	Progress
Review PHAB guidelines to help create an outline for the CHIP	Fall 2016	Ujima United	Drafted outline for CHIP	In action

Use CHA and summary reports from task force and community coalition meetings to write report	March - April 2017	Ujima United	First draft of CHIP completed	
Review first draft of CHIP and make revisions	April 2017	MHD and Ujima United		
Solicit community feedback on draft of CHIP	April 2017	MHD and Ujima United		
Complete final draft of CHIP	May 2017	Ujima United	Completed draft with all agreed upon revisions made	
Disseminate plan via similar communication methods used during earlier activities	May 2017	MHD	Plan has been made available to the public via posting to web, social media, press releases, emails to stakeholders, etc.	

Activity: Implement and continuously evaluate the plan				
Description: An ongoing monitoring system will be needed to evaluate both the process and outcomes of the plan.				
<i>*Additional resources would need to be negotiated if consultation services for the implementation and evaluation of the plan on an ongoing basis are needed.</i>				
Task	Timeline	Person Responsible	Measures	Progress
Coordinate the implementation of the identified strategies.	TBD	TBD	TBD	

Regularly evaluate the progress of identified measures.	TBD	TBD	TBD
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Activity: Maintain community engagement			
Description: An agreed upon method for continued engagement with the community will need to be established *Additional resources would need to be negotiated if consultation services for community engagement on an ongoing basis are needed.			
Task	Timeline	Person Responsible	Progress
Develop a plan for continuous community engagement.	TBD	TBD	TBD
Engage with community partners on a regular basis, based on the community engagement plan.	TBD	TBD	TBD

COMMUNICATION PLAN ADDENDUM			
Activity: Maintain community engagement & ongoing project communication efforts			
Description: Complete project communication activities related to MHD Community Health Improvement Planning Process.			
Task	Timeline	Person Responsible	Progress
Logo Creation	June 2016	Ujima United & KCG	Logo Files Complete
Web Mock Ups	June 2016	Ujima United	Screenshots of website Complete
CHA One-Pager	July 2016	Ujima United & KCG	CHA 1-pager Complete
E-mail Mock Up	July 2016	Ujima United	Constant Contact Complete

Published Webpage	July 2016	Ujima United	Template Email	Complete
Active Social Media Accounts	July 2016 - Ongoing	MHD & Ujima United	Screenshots of website Screenshots of social media accounts	Complete
QPR Code	July 2016	MHD	QPR Code file saved in Box Account	Complete
External Communications	July 2016 - May 2017	MHD & Ujima United	Email message templates, monthly e-newsletter, social media updates and other documents, as needed.	In action
Internal Communications	July 2016 - May 2017	MHD & Ujima United	Email message templates, monthly e-newsletter, social media updates, and other documents, as needed.	In action



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City of Milwaukee Health Department Priority Issues Survey

We want Milwaukee to be the healthiest city in the nation, but need the community's help to get there! Please share which health issues you believe are most important to focus on to elevate the health of the Milwaukee community. Responses will help determine priorities issues for community action planning in 2017-2020. All responses are anonymous and will be reported as a summary.

1. Please choose the TOP 5 ISSUES that you believe need to be addressed to improve the health and well-being of the Milwaukee community. (Check 5 issues)

- Access to affordable and healthy food
- Access to basic human needs (e.g. food, clothing, shelter)
- Access to internet & Wi-Fi
- Access to healthcare services
- Accessibility- resources for disabilities
- Accidental injuries
- Alcohol and substance abuse (including prescription drug and heroin abuse)
- Chronic disease prevention (e.g. heart disease, diabetes)
- Crime and neighborhood safety
- Dental health
- Education (e.g. early childhood, grade school, high school, college or technical school)
- Emergency management including law enforcement and fire protection
- Environment (e.g. healthy, clean air, food, water, lead)
- Health equity (elimination of health disparities)
- Health insurance
- Health of babies and mothers (including infant mortality)
- Health of children and teenagers
- Health of LGBTQ youth and adults
- Health of older adults
- Health of youth and adults with disabilities
- Immunizations
- Infectious disease (e.g. acute disease such as influenza)
- Jobs and income/wages
- Mental health (e.g. depression, anxiety, suicide)
- Nutrition (e.g. healthy food, diet, food allergies)
- Obesity
- Parks and recreation
- Physical activity and exercise
- Poverty
- Quality of healthcare services
- Racism and other forms of discrimination
- Safe and affordable housing
- Sexually transmitted diseases (including HIV/AIDS)
- Stress management
- Tobacco use (e.g. cigarettes, smokeless tobacco, vaping and e-cigarettes)
- Transportation
- Violence (e.g. personal violence and intimate partner violence)
- Other:
- Other:
- Other:
- Other:
- Other:



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2. Do you LIVE in the City of Milwaukee?

NO
 YES (Zip Code: _____)

3. Do you WORK in the City of Milwaukee?

NO
 YES (Zip Code: _____)

4. What is your AGE? _____ Years Prefer not to answer

5. What is your GENDER?

Male Other Gender Identity (Please describe: _____)
 Female Prefer not to answer

6. What is your ETHNICITY?

Hispanic or Latino Prefer not to answer
 Not Hispanic or Latino

7. What is your RACE (Select all that apply)?

White American Indian or Alaskan Native
 Black or African American Native Hawaiian or Other Pacific Islander
 Asian Prefer not to answer

8. Which of the following best describes your current LIVING SITUATION?

Own home Live in a shelter or homeless
 Rent home Other: _____
 Staying with family or friends Prefer not to answer

9. Which of the following best describes your HIGHEST LEVEL OF EDUCATION completed?

Less than high school diploma Bachelor's degree
 High school diploma/ GED Graduate degree or higher
 Some college Other (Describe: _____)
 Associates/ technical (includes trades) degree Prefer not to answer

10. How many people (including yourself) live in your HOUSEHOLD? _____ people

11. Which of the following best describes your TOTAL ANNUAL HOUSEHOLD INCOME before taxes?

Less than \$5000/year \$25,000-\$29,999/year \$50,000-74,999/year
 \$5000-\$9,999/year \$30,000-\$34,999/year \$75,000-\$99,999/year
 \$10,000-\$14,999/year \$35,000-\$39,999/year \$100,000-\$149,999/year
 \$15,000-\$19,999/year \$40,000-\$44,999/year \$150,000+
 \$20,000-\$24,999/year \$45,000-\$49,999/year Prefer not to answer

12. Please feel free to add additional comments or ideas below:

If you have questions or would like more information about this survey, please contact MKEElevate@milwaukee.gov.

Thank you for taking the time to complete this survey!



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CITY OF MILWAUKEE 2015-16 Community Health Assessment Summary

We want Milwaukee to be the healthiest city in the nation. To get there, we need to understand our most pressing health issues. The Community Health Assessment (CHA) is the first step in that process. Through this assessment, the City of Milwaukee Health Department partnered with organizations across Milwaukee to gather data and identify our biggest health risks. The information below serves as the foundation for improving and promoting the health of city residents. Now, it is time to work together. For Our Health. For Our Community. For Our Future.

Areas of Impact on Health
(that can be changed)



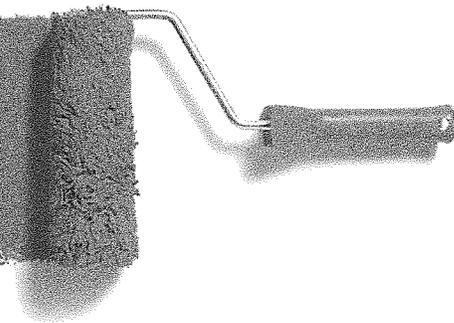
● Physical Environment	10%
● Clinical Care	20%
● Health Behaviors	30%
● Social and Economic Factors	40%

PHYSICAL ENVIRONMENT

Safe water, clean air, healthy workplaces, safe houses, safe communities and safe roads all contribute to good health.

RISKS: Lead-based paint No level of lead has been determined to be safe in humans.

2014 Elevated blood lead levels	Milwaukee	2.70%
Children age 6 and under	Wisconsin	.77%
	United States	.53%



CLINICAL CARE

The healthcare system includes many barriers that limit access to necessary care.

In 2015, 16% of households reported one or more members were not covered by health insurance anytime in the past 12 months.

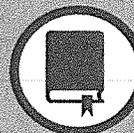
BARRIERS TO CLINICAL CARE ACCESS:



Transportation



Delays to get an appointment



Health care services are not culturally appropriate



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HEALTH BEHAVIORS

There are 4 health-related behaviors responsible for nearly 70% of deaths in the US.

PHYSICAL ACTIVITY	DIET	TOBACCO	ALCOHOL
Overweight adults	Adults eating 2 or more servings of fruit per day.	Current tobacco cigarette smokers.	Adults binge drinking in the past 30 days.
74% Milwaukee 67% Wisconsin 64% USA	59% Milwaukee 34.9% Wisconsin 21.5% USA	21% Milwaukee 19% Wisconsin 19% USA	35% Milwaukee 23% Wisconsin 17% USA

SOCIAL AND ECONOMIC FACTORS

Income & Social Status | Race | Education | Food Security | Social Support Networks



People at or below the Federal Poverty Line
29.4% Milwaukee
13.3% Wisconsin
15.6% USA



Reading level is a critical predictor of high school success or failure.
The percentage of eighth graders either advanced or proficient in reading:
15.2% Milwaukee
33.9% Wisconsin
32.4% USA



Student who qualify for free or reduced lunch
83% Milwaukee
42% Wisconsin
52% USA



Milwaukee adults without adequate social or emotional support
20.9% Milwaukee
16.1% Wisconsin

Evolving research indicates a strong relationship between self-reported experiences of RACISM and poor health.

Milwaukee is the most racially segregated metropolitan statistical area in the nation.

For the full report, visit www.milwaukee.gov/MKEelevate.

The mission of the City of Milwaukee Health Department is to ensure that services are available to enhance the health of individuals and families, promote healthy neighborhoods, and safeguard the health of the Milwaukee community.

**Department of Administration
Purchasing Division**

**Finance & Personnel Committee Approval Required
For Single / Sole Source Contract
Contract #E11022**

Background:

User Department:	DOA - Office of Small Business Development
Purchasing Agent:	Catina Slocum
Contract Description:	VSC B2GNow Contract Monitoring Software and Maintenance
Vendor Name and Location:	B2GNow (Phoenix, AZ)
Contract Term:	One (1) year from 6/1/2011 through 5/31/2012 with the option to extend annually as needed
Requisition # and Date Received:	Requisition #14748, Received 6/20/2016
Original Contract Amount:	\$36,300.00 (GRANT-FUNDED)
Expenditures to Date:	\$120,209.00
Current Contract Amount:	\$132,350.00

Purpose of Contract/Amendment:

The purpose of this contract amendment is to provide continued software and maintenance support for the Office of Small Business Development's B2GNow Contract Monitoring Software purchased from B2GNow in 2011. This represents the seventh (7th) amendment request by the Office of Small Business Development (OSBD) to the original contract amount of \$36,300.00. This amendment will extend the contract term one (1) year from 6/1/2016 through 5/31/2017 and increase the estimated contract total by \$18,620.00 from \$132,350.00 to \$150,970.00.

Background:

The OSBD solicited quotes and scopes of work from this contractor (B2GNow), Elation Systems and TRS Consultants/MyLCM in requesting the original contract; however, the other vendors were not competitively priced. The OSBD determined that B2GNow is the most cost-effective contractor providing the most comprehensive software package with flexibility meeting their needs. The B2GNow software enables the OSBD to ensure availability of opportunities in commodity procurement, construction, service orders and professional services to small and emerging businesses and prompt payment for City sub-contractors. This software interfaces with the City's existing Financial Management Information System (FMIS) payment system, as approved by the Department of Administration-Information Technology Management Division (ITMD).

Since 2011, the City has benefited from a flat fee for each system module procured. The vendor recently changed its cost structure transitioning from a flat fee to bulk pricing, which increased the annual maintenance costs. As a result, additional funds are needed to support the continuation of services.

Usage of this software is necessary in order for City departments and contractors to comply with Common Council File #101137, relative to the Prompt Payment Policy adopted on January 27, 2011 and implemented July 27, 2011.

If Amendment, History of Contract Amendments:

Date	Item	Term	Cost
5/25/2011	Original Contract #E11022 – Vendor Service Contract for B2GNow Contract Monitoring Software and Maintenance	6/1/2011 through 5/31/2012	\$36,300.00
6/15/2012	Amendment #1: Extend the contract for one (1) year from 6/1/2012 through 5/31/2013, add Ethnicity and Gender as Search Options on the Public Certified Directory Search at a cost of \$1,250.00 and one (1) year of maintenance at \$17,800.00, for an increase to the estimated contract total of	6/1/2012 through 5/31/2013	\$19,050.00

	\$19,050.00 from \$36,300.00 to \$55,350.00. F&P Committee Waiver Presented 6/15/2012		
1/25/2013	Amendment #2: Add Online Certification Application Module at a cost of \$3,500.00 and one (1) year of maintenance at \$3,500.00, and add \$4,000.00 to cover anticipated expenditures during the remainder of the current contract period, which is effective through 5/31/2013, for an increase to the estimated contract total of \$11,000.00 from \$55,350.00 to \$66,350.00. F&P Committee Waiver Presented 1/25/2013	6/1/2012 through 5/31/2013	\$11,000.00
4/24/2013	Amendment #3: Extend the contract for one (1) year from 6/1/2013 through 5/31/2014, exercising the second (2nd) and final allowable extension, and increase the estimated contract total by \$50,000.00 from \$66,350.00 to \$116,350.00 to ensure adequate funding during the extension. F&P Committee Approval 4/24/2013	6/1/2013 through 5/31/2014	\$50,000.00
6/18/2014	Amendment #4: Add the option to extend annually as needed and extend the contract one (1) year from 6/1/2014 through 5/31/2015. No F&P Committee Approval Required	6/1/2014 through 5/31/2015	N/A
5/6/2015	Amendment #5: Remove the goal setting module from the contract, extend the contract term one (1) year from 6/1/2015 through 5/31/2016 and increase the estimated contract total by \$13,000.00 from \$116,350.00 to \$129,350.00. F & P Committee Approval 5/6/2015	6/1/2015 through 5/31/2016	\$13,000.00
10/7/2015	Amendment #6: Increase the estimated contract total by \$3,000.00 from \$129,350.00 to \$132,350.00 to cover the design, planning, implementation, and training for three (3) SBE certification applications. F & P Approval Waived (amendment < \$10,000)	N/A	\$3,000.00
Pending	Amendment #7: Extend the contract term one (1) year from 6/1/2016 through 5/31/2017 and increase the estimated contract total by \$18,620.00 from \$132,350.00 to \$150,970.00.	6/1/2016 through 5/31/2017	\$18,620.00
Total (including the pending amendment)			\$150,970.00

City Purchasing Director

Date