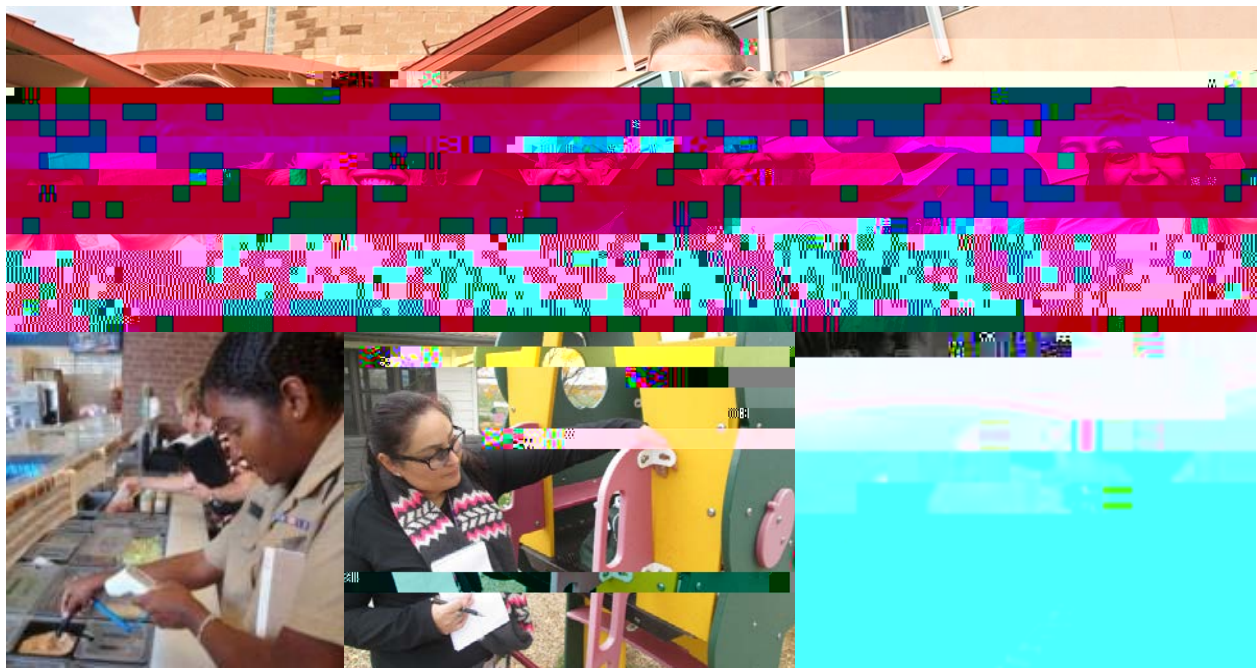




Environmental Health Toolkit

Strengthening Environmental Health Programs and Services in your Tribal Community



July 2017

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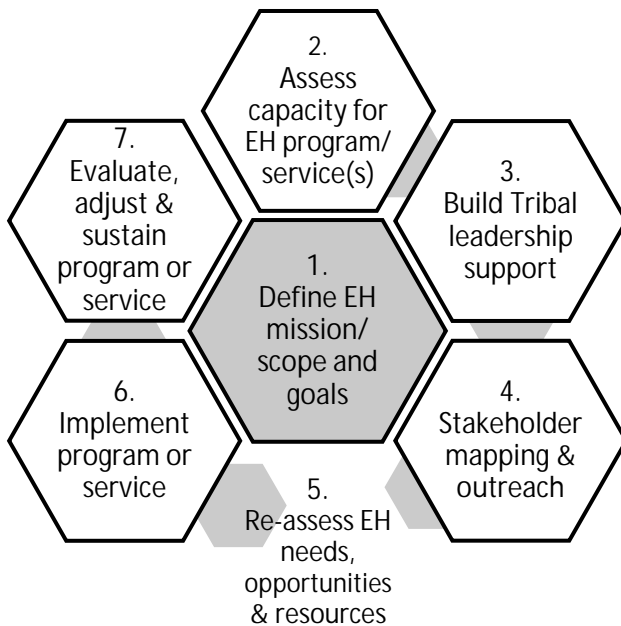
Chapter 1: Getting Started

1.1 TOOLKIT GOALS AND ROADMAP

The Indian Health Service (IHS) Divisions of Environmental Health Services (DEHS) has developed this Toolkit in order to improve the services provided by IHS and to assist tribes in developing and implementing environmental health programs. The goal of this Toolkit is to provide a set of resources for helping Tribe's assess and strengthen their Environmental Health programs and services in order to support a comprehensive, integrated approach to environmental health. The second goal of this Toolkit is to clearly identify the operational standards for a governmental environmental health system and support tribes in achieving them.

Whether your Tribe is receiving direct service from your area IHS office, contracting, or compacting various services, this Toolkit can be used to assess the current and future state of your Tribe's environmental health programs and services and identify what's needed to take EH to the next level.

Figure 1.1 outlines seven steps or a "roadmap" for developing your Tribe's environmental health programs and services. This roadmap has also been converted into an Environmental Health Program Startup/Improvement Work Plan to help tribes track and perform the work required to move through the steps. It follows on the next 2 pages.



Hold a Toolkit Workshop!

It is also recommended that you contact your local area Environmental Health Specialist at 1-800-468-1098 for more information.

Figure 1.1 Roadmap for Developing Tribal EH Programs and Services

Keys To A Successful Environmental Health Program

It takes time to develop an effective environmental health program, and requires considerable planning. The following elements are important when it comes to building a strong foundation for a successful program and are reflected in the EH Toolkit Roadmap:

- x Determining the mission of your program and use it to help guide decisions about priorities, actions, and responsibilities.
- x Gaining support from internal and external stakeholders, such as Tribal leaders and departments, health department staff, and local public health practitioners.
- x Assessing community needs/risks and tailoring programs and services to meet those needs. This includes learning about the culture of the Tribe(s) you serve and find ways to incorporate cultural elements and values into your program.
- x Engaging and communicating clearly and frequently with stakeholders (internal and external) to build awareness, support and relationships critical to the success of EH programs and services
- x Ensuring sustainability of the program through sound administrative principles, financial management, and investing in staff who will deliver quality services.
- x Evaluating the effectiveness of your program frequently to measure progress.

This Toolkit is designed to help you think through each of these elements. We also recommend that you reach out to your local area DEHS office and Environmental Health Officer. They can help you host a half day workshop where you and key stakeholders can discuss your Tribe's current and future needs when it comes environmental health programs and services.

Throughout the Toolkit, programs and services are continually mentioned as they are two different elements. A **program** is the overarching infrastructure for providing a collection of services. For example, Safe Drinking Water is a program which provides the services of water testing, emergency water services, public education, and many other services. Depending on a Tribe's size and/or needs, they could start at either the program or service level.

Figure 1.2 Estimated Cost of EH Program Components

EH Program Component	Annual Cost Estimate
EH Specialist	\$45,000 - annual salary *location dependent

1.3 INDIAN HEALTH SERVICE AND TRIBAL ENVIRONMENTAL HEALTH

Introduction To Tribal Environmental Health

In order to achieve the mission of the Indian Health Service (IHS) and accomplish the goals set forth in Healthy People 2020 and the National Prevention Strategy, our Tribal health system must transform into one which is based on prevention and wellness. Such a transformed health system aims to provide improved health and better care at a lower cost. To realize such transformed health system and address 21st century health challenges, the Tribal health system will require a strong public health system designed to support individuals outside of the clinical setting where they live, learn, work, and play.

Many Tribes now operate their own health systems, with fully half of the traditional IHS care system being managed by tribal health departments under self-determination contracts (Title I) or self-governance compacts (Title V). Tribes are sovereign nations that define their own service populations and are committed to promoting and protecting the health and well-being of tribal members and all people residing within their self-defined service areas.

Historically, Tribes have not been funded for public health nor environmental health. Most existing treaties with the federal government include the provision of health care services; however, public health is not specifically named. Tribal health systems traditionally focus on patient-centered services, based on the federal IHS model. Clinical services which involve treating more emergent needs are often prioritized over broader public health and environmental health services.

The tribal health system overall is underfunded, significantly impacting its ability to address the public health needs contributing to the health disparities of the American Indian/Alaska Native (AI/AN) population. In order to address the lack of funding and improve the AI/AN population health, tribes must develop and implement a conceptual framework for governmental public health services.

Background & Rationale

Like public safety, public utilities, and other public infrastructure, there is a foundational level of public health services that must exist. The Core Public Health Functions Steering Committee developed

The IHS Approach to Environmental Health

American Indians and Alaska Natives face environmental hazards that affect health status. Maintaining a healthy environment is central to increasing quality of life and years of healthy life. Globally, nearly 25 percent of all deaths and the total disease burden can be attributed to environmental factors. Environmental factors are diverse and far reaching.

The purpose of a Tribal Government Environmental Health Program is to address the wide range of environmental conditions in AI/AN communities that contribute to public health and quality of life. Healthy environments where we live, learn, work, and play are recognized as a vital factor in a person's overall health and well-being.

Everyone has a right to safe food, clean drinking water, and standards of living and housing that protect health.

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At IHS, Environmental Health Services (EHS) falls under the Office of Environmental Health and Engineering (OEHE). The EHS Program works with tribal communities to prevent disease and injury by:

- x Monitoring and investigating disease and injury;
- x Identifying health hazards in the environment; and
- x Providing training, technical assistance, and project funding.

health could appear in the curricula of schools or community center programs. It can be helpful to connect to the stories and governing documents that are central to your Tribe.

2. Developing internal support with the Tribal Council, across departments and other critical internal stakeholders

Environmental health spans a number of Tribal services: public health, community services, natural resources, planning and land use, housing, hospitality, retail, and gaming. If your Tribe is working with IHS to deliver EH services, you will need to identify which services are currently underway in e0.003Derv 13(r)42eto y:

CONNECTING WITH OTHERS

If you would like to speak with someone who can help you think through how you might change the ways in which your Tribe is providing Environmental Health services, you may contact any of the Tribes and organizations listed in the **Lessons Learned from the Pacific Northwest** section of this Toolkit.

You may also contact:

- x Your local IHS DEHS Director who can connect you with local resources
- x The Environmental Health Services Center (EHSC) in Albuquerque, <https://www.ihs.gov/EHSCT/index.cfm?CFID=40529484&CFTOKEN=35668023>;
- x IHS Headquarters Division of Environmental Health Services, (301) 443.1054;
- x The Portland Area Division of Environmental Health Services, <https://www.ihs.gov/portland/dehs/> or (503) 414.7777; and
- x Your county and state Health Department or Environmental Health Association

Chapter 2: Understanding Environmental Health

2.1 DEFINING ENVIRONMENTAL HEALTH

What Is Environmental Health?

Environmental health is the branch of

Environmental Public Health Standards

2.2 WHAT'S THE MISSION OF AN ENVIRONMENTAL HEALTH PROGRAM?

Developing A Mission Statement

A well-developed EPH mission statement will separate what is important from what is not, clearly state who will be served and how, and communicate a sense of direction to the Tribe.

Your mission statement should be a sincere, short, and simple statement. Your environmental health program mission statement needs to describe what you do/why you exist, who you serve, and how you do it. It is important to ensure th-10(8t)]TJ0.005 Tc -0.001 Tw 11.98 0 Td[(the)13(E.49 0 Td(25)Tj5-

2.3 WHAT SHOULD YOU INCLUDE IN YOUR ENVIRONMENTAL HEALTH PROGRAM?

Determining The Scope Of Your Environmental Health Program

We have previously defined the core services for a Tribal Government Environmental Health Program. Your program will be based on your Tribe's population, geographic boundaries and characteristics, the number and type of facilities requiring health and safety oversight, and many other factors.

It is important to remember that the purpose of governmental environmental health is to ensure that our drinking water, restaurants, schools, medical facilities, homes, pools and lodging facilities are safe. Environmental health programs also monitor for hazards related to outdoor recreation and workplaces, prepare for health risks related to climate change, and protect people from unnecessary exposure to toxins. The following resources and links can help guide you to defining your program's scope:

It is also important to find ways to incorporate cultural elements and values into your program. Many Tribes may have interest in providing additional services or centering their program on more ecologically-driven concerns. For instance, if the motivation for creating an environmental health program is around the continued quality harvest of salmon, then governmental environmental health program development could look like this:

Figure 2.1

Using The DEHS 5 National Priorities as a Starting Point

A good starting point for determining the scope for your Tribe's EH programs and services is through the lens of DEHS's 5 national priorities introduced in Chapter 1:

Children's Environment

Food Safety

Healthy Homes (and Places)

Vectorborne and Communicable Disease

Safe Drinking Water

The Introductory Assessment Worksheet is a good one to complete and discuss with Tribal leadership and key stakeholders to identify critical needs and opportunities as well as build awareness. It is also recommended that you contact your local area Environmental Health Officer to discuss the opportunities they see for your Tribe. Your EHO could also help you and your stakeholders think through how to strengthen your EH program and services by holding a 4-hour workshop based on this Toolkit.

Resources for Section 2.3

- ¾ Resource: 2.3a Sample Scope and Mission Statement. Seminole Tribe of Florida.
- ¾ Resource: 2.3b PAO DEHS 2016 Profile.
- ¾ Resource: 2.3c Examples of Community Environmental Projects.

Introductory Assessment Worksheet

1. What programs and services does your Tribe currently offer in each area?

Children’s Environment

List/describe programs/services:

Food Safety

List/describe programs/services:

Healthy Homes (and Places)

List/describe programs/services

Vectorborne and Communicable Disease

List/describe programs/services

Safe Drinking Water

List/describe programs/services

Others:

List/describe programs/services

2.4 WHAT EH DELIVERY MODEL BEST MEETS YOUR NEEDS?

Environmental Health Service Delivery Models

You will need to consider (or re-consider) how you will deliver the Environmental Health Program is that best meets the Tribes needs and delivery capacity. As a sovereign government and the local health authority, the Tribe has multiple options for administering and managing an environmental health program. Many Tribes have inadequate government infrastructure, not enough funding resources, and such small populations that it seems infeasible to deliver their own program.

In general, there are 5 options for delivering a Tribal Government Environmental Health program, each an equal expression of sovereignty:


1. The Tribe retains direct service delivery from the IHS, IHS and the Tribe collaborate to build the Tribe's local capacity in environmental health.
2. The Tribe assumes the program shares from the IHS and delivers the program.
3. The Tribe assumes the program shares from the IHS and partners with other Tribes through a consortium to deliver a regional program.
4. The Tribe assumes the program shares from the IHS and purchases services through a contractor.
5. The Tribe assumes the program shares from the IHS and enters into an intergovernmental agreement with another local health authority for cross-jurisdictional sharing of services.

Health departments of all types and sizes are sharing services and exploring cross-jurisdictional sharing and collaboration arrangements more frequently. Cross-jurisdictional sharing is a growing strategy used at state, tribal, local, and territorial levels to address opportunities and challenges such as tight budgets, increased burden of disease, and regional planning needs.

Please see the **Service Delivery Option Decision Tree** on the next page to help you determine which delivery model would work best for your Tribe.

Figure 23 Service Delivery Options Decision Tree

Tribe interested in starting a governmental



Examples of cross-jurisdictional sharing include

- x Regionalization of health departments, such as through the consolidation of two or more health departments
- x Sharing staff between two or more health departments, such as an epidemiologist or Environmental Health Specialist that supports multiple health department jurisdictions
- x Sharing defined services, such as laboratory testing services or inspection services
- x Collaborative assessment and planning processes that include two or more health departments and leads to shared priorities; examples mi12.1(mi0)6(0)4(o)2(g)6(4(tDd[(i).t)-4(ip)l)e(r)m)1

Intergovernmental Agreements between Tribes and surrounding local governments are founded on mutual respect. They serve as a pledge that the governments are committed to maintaining positive government-to-government relationships for the benefit of all community members. Many Tribes have agreements with their neighbors that address a multitude of services such as police protection and mutual aid, fire protection, zoning and land use, road maintenance, sewerage district services, storm water, environmental protection and restoration, tourism, and emergency communications.

Resources for Section 2.4

- ¾ **Resource 2.4a: Service Delivery Options Decision Tree**
- ¾ **Resource 2.4b: IHS Reference Guide, Differences between Title I Contracting and Title V Compacting under PL 93-638.**
- ¾ **Resource 2.4c: 638 Toolkit**
- ¾ **Resource 2.4d: IHS Portland Area Programs, Functions, Services, and Activities. Excerpt of Environmental Health Services.**
- ¾ **Resources 2.4e – 2.4j: Multiple sample Tribal MOUs and MOAs for the Delivery of Public Health Services.**
- ¾ **Resource 2.4f: Exploring Service Sharing to Improve Tribal Public Health. Agreement Examples and a Worksheet from the Institute for Wisconsin's Health.**
- ¾ **Resource 2.4g: Public Health Mutual Aid Agreements – A menu of suggested provisions from the CDC Public Health Law Program.**
- ¾ **Resource 2.4h: Shared Services in Public Health.**

Chapter 3: Assessing & Developing Capacity EH Programs and Services

3.1 INTRODUCTION TO THE PORTLAND AREA CAPACITY ASSESSMENT TOOL (PACAT)

Once you have defined your, it is reco

Through the process of completing the EHS CAT, users will:

- ” Assess the capacity of an EH System or program to perform the EssEnvHS.
- ” Identify critical gaps in performance to inform the development of an action plan to

I. Core Functions and Activities of an Environmental Health Program

ASSESSMENT (PREVENT)

1. Monitor Environmental and Health Status to Identify and Solve Community Environmental Health Problems (SCORE: _____) out of 4 possible points

1.1 Does your Tribe have a formal system in place to identify and assess environmental health threats (such as a policy for a data tracking or surveillance system)?

Yes

No

Don't know

If yes, please describe your Tribal policies:

1.2 Does your Tribe have a formal system in place to acquire community input?

Yes

No

Don't know

1.3 Does your Tribe routinely conduct a community environmental health needs assessment?

Yes

No

Don't know

1.4 Does your Tribe have a formal system for identifying vulnerable populations?

Yes

No

Don't know

2. Diagnose and Investigate Environmental Health Problems and Hazards in the Community (SCORE: _____) out of 4 possible points

2.1 Does your Tribe have written protocols to analyze the relationship between environmental health hazards and health impacts?

Yes

No

Don't know

2.2 Does the Tribe have memorandum of agreement with agencies involved in investigating and mitigating environmental hazard/risk?

Yes

No

Don't know

If yes, please check which agencies (check all that apply):

Local County Health Department

State Health Authority

U.S. Environmental Protection Agency

U.S. Department of Housing

and Urban Development

Indian Health Service

Other
(specify)_____

2.3 Does your Tribe have communicable disease control capacity to investigate environmental hazards or environmentally related disease and injury?

Yes

No

Don't know

2.4 Does your tribe have technical capacity to perform environmental health risk assessments as part of an outbreak or emergency response?

Yes

No

Don't know

POLICY DEVELOPMENT (PROTECT)

**3. Inform, Educate, and Empower People about Environmental Health Issues (SCORE: _____)
out of 3 possible points**

3.1 Does your your Tribe have an environmental health advisory group?

Yes

No

Don't know

3.2 Does your Tribe regularly provide environmental health information and/or training to the community?

Yes

4.4 Does your Tribe have a formal process for developing collaborative or shared efforts on issues of common interest?

Yes

No

Don't know

4.5 In the past 12 months, have Environmental Health staff collaborated closely on projects (e.g., publication of a report, preparation of a grant application, design or evaluation of a program or intervention) with one or more of the following agencies and/or organizations:

Private voluntary organizations (e.g. Red Cross) Yes No Don't know

Managed care organizations (e.g. Kaiser Permanente) Yes No Don't know

U.S. Environmental Protection Agency (EPA) Yes No Don't know

U.S. Dept of Housing and Urban Development (HUD) Yes No Don't know

Indian Health Service Yes No Don't know

Local Health Department Yes No Don't know

State Health Department Yes No Don't know

Other (specify): _____

5. Develop Policies and Plans that Support Individual and Community Environmental Health Efforts (SCORE: _____) out of 4 possible points

5.1 Does the Tribe have a formal process in place to develop a plan to address priority environmental health issues?

Yes

No

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5.4 Does the Tribe have a formal process in place to review the effectiveness of environmental health policies on a periodic basis?

Yes

No

Don't know

ASSURANCE (IMPROVE)

6. Enforce/Support Laws and Regulations (SCORE: _____) out of 4 possible points

6.1 Does the Tribe have a formal process in place to evaluate the effectiveness, appropriateness, and clarity of laws, regulations, and compliance requirements?

Yes

No

Don't know

6.2 Does the Tribe have a formal process to obtain feedback from the regulated community?

Yes

No

Don't know

6.3 Does the Tribe have ready access to legal advice or resources?

Yes

No

Don't know

6.4 Does the Tribe have a formal system to ensure consistency of enforcement actions?

Yes

No

Don't know

7. Link People to Needed Environmental Health Services and Assure the Provision of EH Services when Otherwise Unavailable (SCORE: _____) out of 4 possible points

7.1 Doe

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Routine inspection and review of regulated entities and recreational facilities, food service establishments, pools or aquatic facilities, child care centers, public tourism and hospitality attractions, and others. List and document types:

A fee schedule for licensing, certification or permitting, inspection or review, or food handler training. List and document types:

Perform and assist with outbreak investigations that have an environmental component.

Conduct ongoing environmental and occupational health surveillance.

Requirements for the staffing (education, training, and licensing) of

-
-
-
-

III. Tribal Management of an Environmental Health Program

1. Does the Program have a written plan or guidelines for Environmental Health?

Yes

No

Don't know

a. Does the program have documented environmental health policies and procedures?

Yes

No

Don't know

If yes, list policies and procedures:

b. Defined scope of services or program elements?

Yes

No

Don't know

If yes, describe scope and elements.

2. Does the Tribe have relationships (MOU, Mutual Aid, etc.) - formal or informal - with local, state, or federal environmental health agencies to assist?

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If yes, list with whom.

CHAPTER 4. WHO TO INVOLVE AND HOW TO BUILD SUPPORT

4.1 STAKEHOLDER ENGAGEMENT: BUILDING INTERNAL AND EXTERNAL SUPPORT

We highly recommend a participatory process when it comes to initiating and/or building your

Step 1 – Identify Your Stakeholders

The first step in Stakeholder Engagement is to brainstorm a list of all of those people and organizations who may be interested in your efforts – either as a supporter or a resistor. Think of all the people who would be affected by your efforts. Be sure to include both internal (Tribal) and external stakeholders. There is no magic list of stakeholders; who should be involved will depend on the scope and nature of your environmental health program and/or services. Below is a list of potential stakeholders to consider.

Figure 4.1 Environmental Health Stakeholders

Potential Stakeholders
x Tribal council
x Other key Tribal elders
x Various Department leaders:
x Natural Resources
x Planning and development
x Housing
x Clinic doctors and/or staff
x Community center directors
x Casino managers
x Food service providers
x Retail providers
x Business leaders
x IHS Environmental Health Specialist (or, Officer)
x Local government public and environmental health officials
x Regional government public and environmental health official
x Vendors and contractors

Step 2 – Understand Your Key Stakeholders

You now need to know more about your key stakeholders. Once you have identified a list of stakeholders, it is useful to do further analysis to better understand their relevance and the perspective they offer, to understand their relationship to environmental health programs and services. You need to know how they are likely to feel about and react to your project so you can determine what and how to best communicate with them.

Key questions that can help you understand your stakeholders are:

- x How will your environmental health program and/or services **benefit** them?
- x How will your environmental health program and/or services **impact** them?
- x What will they be most concerned about? What are their interests?
- x What information will they want from you?
- x If they are not likely to be positive, how might you earn their support of your project?

2. Legitimacy: How legitimate is the stakeholder's claim for engagement?
3. Willingness to engage: How willing is the stakeholder to engage?
4. Influence: How much influence does the stakeholder have and who do they influence? This could uncover additional stakeholders.
5. Necessity of involvement: Is this someone who could derail or delegitimize the project?

- x **Develop a program identity based upon your mission statement:**
 - x Choose a name and design a logo for your program that is unique and will be meaningful in your community.
 - x Consider obtaining feedback on your program name from community members.
 - x Consider working with local artists to design your program's logo.
 - x Incorporate local culture and traditions into messages and graphics.
- x **Develop program materials, such as:**
 - x Letterhead,
 - x Signage (e.g., banners, marquee)
 - x Brochures and flyers
 - x Fact sheets
 - x Promotional materials in your recruitment efforts, such as:
 - x Monthly calendar of events
 - x Public service announcement scripts for radio and TV stations (provide brief information about your program and contact information)
 - x Create ads and write articles about your program, the benefits of environmental health, participant success stories, project news, etc.
- x **Ensure that you have written consent to include a person's photo and/or quote on**

Resources for Section 5.1:

- ¾ Resource 5.1a: Public Health Terminology. Glossary of useful terms for governing and managing programs.
- ¾ Resource 5.1b: Association of State and Territorial Health Officials, Guide to Knowing Tribal Health.
- ¾ Resources 5.1c – 5.1e: Multiple examples of Tribal Health Programs' governance structure and organizational chart.
- ¾ Resource 5.1f: CDC Profile in Public Health Law News. Interview with Patrick Peck, Environmental Health Program Manager for the Seminole Tribe of Florida.

GUIDELINES, POLICIES, & PLANS

How are local health departments funded?

³/₄ Resource 5.2aa: IHS DEHS Fund Distribution Methodology (final draft). A reference guide to understanding the appropriations and flow of funds for delivering IHS environmental health programs.

³/₄ Resource 5

Both leadership and management skills are necessary to achieve the results associated with the administration of a successful program. Consider the processes you'll need to put in place to ensure these skills are practiced, such as regular meetings and facilitation methods to promote new ideas and ways to coordinate work across a team or multiple departments that might be involved in your environmental public health program and services.

Figure 5.2: Leadership, Management and their Combined Results

In 2008, a cross-functional workgroup of mid- and senior-level Office of Environmental Health and Engineering (OEHE) staff was assembled to develop the OEHE Leadership and Personal Development initiative (LPD).

The focus of the LPD is to grow leadership competenc

Suggested Activities for Developing Within Each Competency

LEADING SELF: Emotional Awareness

- { Myers-Briggs Type Indicator
- { StrengthsFinder
- { Emotional Intelligence Assessment

- x investigate, sample, measure, and assess hazardous environmental agents in various environmental media and settings;
- x recommend and apply protective interventions that control hazards to health;
- x develop, promote, and enforce guidelines, policies, laws, and regulations;
- x develop and provide health communications and educational materials;
- x manage and lead environmental health units within organizations;
- x perform systems analysis;
- x engage community members to understand, address, and resolve problems;
- x review construction and land use plans and make recommendations;
- x interpret research utilizing science and evidence to understand the relationship between health and environment; and
- x interpret data and prepare technical summaries and reports.

These competencies are best realized through a licensed professional. The REHS/RS is the most prevalent credential and professionals demonstrate competency in an impressive range of environmental health issues, directing and training personnel to respond to routine or emergency environmental situations, and providing education to their communities on environmental health concerns. In addition, REHS/RS credential holders are key members in ensuring communities are in compliance with local, state and federal environmental health regulations.

Just as important as the technical competencies are the cultural competencies of the professional. There are many challenges in working with unique cultures, sovereign Tribes and other jurisdictions. The environmental health professional must be able to work with all people in a respectful manner and be able to clearly communicate expectations. One method to demonstrate this competency is through the use of “Indian Preference” hiring authorities. It will be important to outline the minimum qualifications and standards you are looking for in the job position description and advertisement.

Resources for Section 5.3

- ¾ **Resource 5.3a: IHS OEHE Leadership and Personal Development Resource Guide.**
- ¾ **Resource 5.3b: Core Competencies for Local Environmental Health Professionals.**
- ¾ **Resource 5.3c: IHS Career Development Plan for Environmental Health Professionals.**
- ¾ **Resource 5.3d: IHS Portland Area DEHS, Sample Training Plan for Entry-Level Environmental Health Professionals.**
- ¾ **Resources 5.3e – 5.3j: Multiple sample position descriptions, MOAs, and contracts for environmental health professionals from Tribes and IHS.**

Not Perfection, But Responsiveness

It is important to note that very few new programs will hit all of their goals from the beginning. What is more important than immediate success is the opportunity and practice of measuring and, often, adjusting course so you stay responsive to program outcomes and emerging community needs. For example, if an important outcome for your community is to ensure good treatment for those with diabetes and prevention for those without diabetes, it will not happen overnight.

While it may be frustrating to look at a year's worth of data that shows that diabetes treatment is poor in one clinic and improving in another clinic, take the opportunity to learn what the improving clinic is doing. When you find small victories, take time to celebrate them, then use those lessons in other places that can benefit.

Resources for Section 6.1

- ¾ **Resource 6.1a: CDC Framework for Program Evaluation.**
- ¾ **Resource 6.1b PEPH Evaluation Metrics Manual.**
- ¾ **Resource 6.1c: WHO Guideline for Evaluation of Environmental Health Services.**

6.2 Evaluation of Community Health Services

Ch.	Citation
5.2f	National Indian Gaming Commission. (2008). Environmental, Public Health and Safety Site Visit Survey [Survey checklist for health and safety compliance in gaming facilities].
5.2g	Partnership for Food Protection, National Workplan Workgroup. (2013). Model for Local Federal/State Planning and Coordination of Field Operations Training .
5.2h	Conference for Food Protection (CFP). (2012). Food Establishment Inspection Report . Available from: http://www.foodprotect.org/
5.2i	U.S. DHHS, Food and Drug Administration, CFP. (2008). Plan Review for Food Establishments . Available from: http://www.foodprotect.org/
5.2j	CFP. (2014). Recommended Guidance for Mobile Food Establishments . Available from: http://www.foodprotect.org/
5.2k	U.S. Department of Agriculture, Food and Nutrition Service (FNS). (2010). FNS Handbook 51: Chapter 7 Warehousing and Inventory Control . Available from: https://www.fns.usda.gov/
5.2l	IHS-DEHS. [Online Food Handler Training System, User Guide, 2013. System can be accessed: https://www.ihs.gov/foodhandler/].
5.2m	IHS-

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5.2x	OHA-PHD. (n/a). Respiratory Disease Outbreaks: Summary of respiratory outbreak investigation strategies. [Accessed 02/12]. Available from: https://public.health.oregon.gov/DiseasesConditions/CommunicableDisease/Outbreaks/Pages/respdisease.aspx
5.2y	Council to Improve Foodborne Outbreak Response. Council of State and Territorial Epidemiologists. (2014). Guidelines for Foodborne Disease Outbreak Response, 2nd edition. Available from: http://www.cifor.us/
5.2z	Minnesota Department of Health. (n/a). Waterborne Outbreak Investigations. [Accessed 09/14]. Available from: http://www.health.state.mn.us/divs/idepc/dtopics/waterborne/outbreaks/investigation.html
5.2aa	IHS-DEHS. [DEHS Fund Distribution Methodology or DEHS Criteria – 2009 Final Draft,

Recommended Resources Used in the Development of the EH Toolkit

Source (alpha order)	Link	What to look for
Centers for Disease Control and Prevention Environmental Health Services: EnvPHPS 10 Essential Services Toolkit	https://www.cdc.gov/nceh/ehs/envphps/essential_services_toolkit.htm http://www.cdc.gov/nphpsp/essentialser vices.html	